SCOPE OF WORK/COOPERATIVE AGREEMENT INSTRUCTIONS

\*\***Please delete this instruction page before submitting a signed final version of this document**\*\*

If a county does not wish to designate an agent and wishes to receive their own allocation **or** a county is proposing to use a designated agent this Scope of Work/Cooperative Agreement is to be used in conjunction with the application to apply for a Lake Monitoring & Protection Network (LMPN) grant.

We understand the extent of the work completed may be dependent on the amount of funding provided. Throughout the document, you will need to replace the text for [designated agent name], [county name], and [**##**] with appropriate text.

The most recent list of county allocations can be found on the Surface Water Grants webpage ([link to county allocations PDF](https://dnr.wisconsin.gov/sites/default/files/topic/Aid/grants/surfacewater/LMPNCountyAllocations.pdf)).

**For Single County** - Scope of Work:

This scope of work is to be used during discussions between the County and DNR AIS Biologist when determining the services and activities that will be completed as part of the LMPN.

The budget will be captured in Section 4 of the grant application.

**For Counties using a Designated Agent** – Cooperative Agreement:

If using a designated agent, each participating county must submit a signed cooperative agreement when participating in the LMPN. This cooperative agreement is to be used during discussions between counties, the designated agent, and DNR AIS Biologist when determining the services and activities that will be completed as part of the LMPN.

Designated Agents and County agreements:

County Allocations: All counties included in the cooperative agreement must list the allocation amount from each county to determine the maximum grant award that can be given to the designated agent.

Proposed Project Budget: If the designated agent is contracting with multiple counties, the total proposed project budget will exceed an individual county’s allocation.

**Submission for County or Counties and Designated Agent:**

Once the scope of work/cooperative agreement is finalized and signed by the County or signed by the County(ies) and designated agent, it can be submitted with the application and the appropriate authorizing resolution (i.e., county’s authorizing resolution or authorizing resolution from designated agent’s organization).

Note: A grant agreement will be sent to the designated agent to sign before funds are distributed directly to the designated agent.

Submissions and questions about this process are sent to DNRSurfaceWaterGrants@wisconsin.gov.

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Scope of Work/Cooperative Agreement for

[County/Counties name]

Calendar Year 20XX

**Term of Agreement:** January 1, 20XX – December 31, 20XX

1. **General Purpose (Choose one)**

**County – Scope of Work**

This scope of work documents the manner in which [county name] County will provide core Aquatic Invasive Species (AIS) Prevention and Citizen Lake Monitoring Network (CLMN) services in [county name] County during the Term of Agreement referenced above.

**Designated agent – Cooperative agreement**

This Agreement documents the manner in which the [designated agent name] (hereafter “agent” or agent name) will provide core Aquatic Invasive Species (AIS) Prevention and Citizen Lake Monitoring Network (CLMN) services in the coverage area during the Term of Agreement referenced above. The coverage area includes the following counties: [county name], [county name], and [county name].

* + 1. [county name] County designates [agent name] as its agent.
		2. All parties agree to meet annually to plan, prioritize, and coordinate project activities.
1. **Goal of [county name/agent name]**

To improve surface water quality through the detection, prevention, and monitoring of AIS and lake water quality conditions.

**C. Duties of [county name/agent name]**

In cooperation with the Wisconsin Department of Natural Resources (DNR), [county name/ agent name] agrees to continue to implement an AIS Prevention and Outreach Program throughout [county name] County. [county name] County/[agent name] will perform the following:

# Services to be performed:

## **Prepare reports and disseminate reports and results.**

Submit [**##**] progress reports to DNR AIS Biologist.

Designated Agents: Submit [**##**] progress reports to counties involved

Submit final report to DNR.

* 1. Before finalizing the progress and final report, send a copy to the DNR AIS Biologist overseeing the grant for review.

Submit final reimbursement request to Environmental Grant Specialist (EGS) and Cc DNR AIS Biologist on [Form 8700-001](https://dnr.wi.gov/files/PDF/forms/8700/8700-001.pdf) no later than 60 days after the end of this agreement.

## **Enter SWIMS data.**

Facilitate and ensure entry of all data into SWIMS for applicable LMPN activities is completed per annual reporting requirements and by end of grant period:

1. Progress reports and final reports, once approved by the DNR AIS Biologist, will be uploaded to the LMPN SWIMS project by the county or agent for each year.
2. Activities performed as part of CBCW, CLMN, PLB, and/or Snapshot Day may have earlier time requirements for data entry.
3. All other activities which involve data entry into SWIMS must be entered by end of grant period.

## **Implement statewide communication and education priorities to ensure consistent AIS messaging.**

* 1. Work with DNR and UW Madison, Division of Extension in implementation of the Wisconsin Statewide Aquatic Invasive Species Management Plan.
	2. Collaborate with DNR on delivery of consistent project communication, outreach, and educational programming.
	3. Coordinate with DNR staff and other local partners within the county to share LMPN AIS prevention and education efforts.

## **Complete a DNR-approved training program for any network activities the county or agent are approved to carry out, including collecting, reporting, and interpreting water quality, aquatic invasive species, or watercraft inspection data.**

Training sessions include:

* 1. Clean Boats, Clean Waters (CBCW) trainings, if applicable
	2. CLMN trainings, if applicable
	3. Purple Loosestrife Biocontrol trainings, if applicable
	4. Snapshot Day, if applicable
	5. Project Red, if applicable
	6. Participate in AIS Early Detection Monitoring, if applicable

## **Attend DNR meetings and annual AIS and Lakes & Rivers Partnership events including, but not limited to:**

1. AIS Partnership meetings in spring and fall (potentially one in-person, one virtual)
2. Wisconsin Lakes and Rivers Partnership monthly meetings (AIS-focused meetings required; others optional).
3. Participate in meetings with DNR to discuss agreement scoping, coordination/planning, agreement accomplishments, and financial status.

## **Adhere to decontamination and disinfection protocols required by the DNR for controlling, transporting, and disposing of aquatic plants and animals, and moving water.**

1. This includes requirements under s. 30.07, Wis. Stats., and chs. NR 19.055 and NR 40.07, Wis. Adm. Code, as well as compliance with the most recent DNR approved ‘[Boat, Gear, and Equipment Decontamination and Disinfection Protocol](https://dnr.wisconsin.gov/sites/default/files/topic/Invasives/MC9183-1.pdf)’.

## **Retain, for a period of six years after the end date of this agreement, all project records, including proof of payments and proof of purchases, and monitoring data sheets to support events/tasks undertaken as part of this agreement.**

Records shall include:

* 1. Training sessions attended.
	2. Training sessions held and names of participants attending.
	3. Meetings with stakeholders and/or partner groups.
	4. AIS outreach activities and any monitoring data sheets.
	5. Media contacts.

# Activities to be performed: Check all activities for participation in 20XX

## **Participate in a DNR-approved watercraft inspection program.**

[ ]  **Tier One**

* Promote CBCW effort and advertise trainings to local community.
* Conduct trainings for interested volunteers and/or paid staff on methods to conduct boat inspections and engage boaters in AIS prevention steps.
* Train participants how to enter CBCW data into SWIMS.

[ ]  **Tier Two**

* Conduct CBCW inspections at launches in coverage area.
* Assist with Statewide Boater Behavior Study (as requested).
* Work with partners to apply for CBCW grants to fund additional inspectors.

## **Participate in monitoring and/or training for aquatic invasive species.**

[ ]  **Perform early detection monitoring**

* Monitor [**##**] lakes/streams/wetlands using DNR-approved protocols
* [Early Detection Protocols](https://dnr.wisconsin.gov/topic/Lakes/AIS/Monitoring.html)

* [CLMN AIS Monitoring Protocols](https://www3.uwsp.edu/cnr-ap/UWEXLakes/Pages/programs/clmn/AIS.aspx)
* [Project RED Survey Protocols](https://wateractionvolunteers.org/projectred/)

[ ]  **Train citizens/volunteers to perform early detection monitoring**

* Train [**##**] citizens to monitor for AIS using DNR-approved protocols
* [CLMN AIS Monitoring Protocols](https://www3.uwsp.edu/cnr-ap/UWEXLakes/Pages/programs/clmn/AIS.aspx).
* [Project RED Survey Protocols](https://wateractionvolunteers.org/projectred/)

[ ]  **Assist DNR in response monitoring**

* Work with regional DNR AIS Biologist to provide AIS response monitoring based on new AIS Findings.
* Assist with response monitoring, which could include non-traditional methods of monitoring as requested by the DNR, US Fish and Wildlife Service, UW Sea Grant, Wisconsin Department of Agriculture, Trade and Consumer Protection (DATCP), etc.

[ ]  **Host a Snapshot Day event**

* Attend annual Site Leader training or view recording, asking questions to UW Extension Rivers Educator as needed.
* Arrange for training site location, select local monitoring stations, train, and coordinate volunteers on day of event.
* Assist in local advertising to solicit volunteers. Communicate with volunteers ahead of event regarding meeting times and locations, and general expectations.
* Maintain communication with UW Extension Rivers Educator to receive and apply seasonal updates.
* Complete ID verification with DNR AIS Biologist prior to data entry into SWIMS.
* Enter monitoring data into SWIMS within communicated deadline and send participation records to UW Extension Rivers Educator.

[ ]  **Participate in Project RED**

* Conduct at least [**##**] Project Riverine Early Detectors (RED) surveys using [Project RED survey protocols](https://wateractionvolunteers.org/projectred/).
* Review training videos each year and ask questions to UW Extension Rivers Educator as needed.
* Train [**##**] volunteers using Project RED protocols, including how to enter data into SWIMS.
* Provide ongoing support for volunteers for general questions and species verification.
* Report trainings to SWIMS training projects.

## **Participate in aquatic invasive species prevention campaigns and lake protection activities as approved by the DNR.**

## Select the campaign(s) participating in:

[ ]  Great Lakes AIS Landing Blitz (Open Statewide)

[ ]  Drain Campaign

[ ]  Serve as media contact for the county for all DNR campaigns

## **Participate in the purple loosestrife biocontrol (PLB) program.**

[ ]  **Tier One -** For counties new to the PLB program or wishing to reestablish a program.

* Review extent of purple loosestrife populations and possible beetle refuges.
* Determine plan to move forward based on level of need; if possible, engage with other counties in region conducting PLB for mutual support.
* Support partners as needed; may include digging, beetle collection, releases, etc.
* Report beetle presence and activity and biocontrol releases in the SWIMS database.
* Assist or enter volunteer data into SWIMS.

[ ]  **Tier Two** - For counties with existing PLB programs or who wish to expand based on need and available funding.

* Support and expand the existing network within your county and/or work with neighboring counties for coordinated responses. (e.g., recruiting partners/volunteers, beetle collection/release, conducting county rearing)
* Identify and monitor insectaries and beetle refuges, coordinate or participate in the collection and distribution of PLB organisms to all interested partners, and target the release of organisms, where needed, in [county name] County.
* Plan and conduct [**##**] educational workshop to promote the PLB program.
* Utilizing the program forms, report beetle presence and activity and biocontrol releases in the SWIMS database. This includes entering data for partners who do not use SWIMS.

[ ]  **Tier Three** -For counties with well-established programs. Tier One or Tier Two must be selected above.

* Conduct a needs assessment of sites to determine:
	+ - Sites that need continued biocontrol
		- Sites that can pause biocontrol for a short- or long-term period
		- Sites that could utilize integrated management, such as digging or chemical treatments
		- Sites that should maintain some level of purple loosestrife to act as county insectaries and/or refuges

## **Participate in the Citizen Lake Monitoring Network (CLMN).**

***Work with local DNR CLMN Coordinator to fill out this section.***

Name of DNR CLMN Coordinator who approved the activities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  **Tier One -** In addition to conducting training for CLMN volunteers on AIS monitoring or water clarity (Secchi), complete the following activities.

* Assist the DNR CLMN Coordinator in promoting the program and soliciting for volunteers.
* Assist the DNR CLMN Coordinator to train new volunteers and supply annual sampling supplies to CLMN volunteers.
* Perform field checks with CLMN volunteers as needed and conduct quality assurance checks on data entered into SWIMS by citizen monitors at the end of monitoring year.
* Assist with email/phone queries to answer questions from CLMN volunteers.
* Assist with CLMN volunteer SWIMS data entry, as needed.
* Check-in with DNR CLMN Coordinator during the field season. DNR CLMN Coordinator needs to be notified immediately during the field season if some of the above tasks cannot be completed.
* Briefly describe check-in plan established with DNR CLMN Coordinator.

[ ]  **Tier Two -** Includes coordination of water chemistry activities (e.g., temperature, phosphorus, chlorophyll-*a*, and DO). Tier One must be selected above.

* Conduct training for CLMN volunteers.
* Assist DNR CLMN Coordinator to train new volunteers and supply annual sampling supplies to CLMN volunteers.

[ ]  **Tier Three -** Includes coordination of Quality Assurance and Quality Control (QA/QC) sampling (duplicate and blank samples). Tier One and Tier Two must be selected above.

* Conduct QA/QC training for CLMN volunteers.
* Perform field checks with CLMN volunteers, as needed.
* Conduct QA/QC checks on data entered by CLMN volunteers into SWIMS at the end of monitoring year.

## **Participate in and coordinate partner involvement to implement the** [**Wisconsin Aquatic Invasive Species Management Plan**](https://dnr.wi.gov/water/wsSWIMSDocument.ashx?documentSeqNo=199335111)**’s pathways approach.**

**Organisms in Trade (OIT) Pathway**

[ ]  Promote and/or attend and assist with pet rehoming events in coverage area.

[ ]  Monitor pet stores by conducting at least [##] pet store visits.

**Recreational Activities and Service Providers Pathway**

[ ]  Facilitate AIS prevention programming for DSP pathway.

* Contribute to dock service providers (DSPs) database by identifying DSPs in coverage area.
* Recruit [##] DSP(s) to participate in a 1:1 training
* Provide DSP content to [##] public groups (e.g. present toolkit .PPT at a meeting, share ‘Article for Lake & River Groups’)

[ ]  Participate in waterfowl hunter outreach.

* Perform [**##**] waterfowl hunter outreach at hunter entry points.
* Provide outreach at local hunting events (e.g., conservation club meetings, waterfowl hunter expos, etc.).
* Provide outreach through media.

[ ]  Coordinate and conduct [**##**] checks to verify condition of DNR AIS signage at lake/river public access sites.:

* Use DNR-approved forms to report signage inspections and enter data in SWIMS.
* Maintain digital photographs of AIS signs that have been inspected and upload them as part of the signage fieldwork events to the County’s AIS Signage Project in SWIMS.
* Install DNR AIS signage, as needed, and per installation guide.

[ ]  Contact at least [**##**] bait shops as part of the statewide Bait Shop Initiative and provide AIS outreach message and materials.

* Report to the county Bait Shop Initiative project in SWIMS.

## **Support Pathways Programming**

[ ]  Participate in other AIS Pathways initiatives or work groups as requested by the Department.

## **Provide AIS outreach and education to local partners and AIS stakeholders.**

[ ]  Represent the AIS Partnership at [**##**] events.

* Events include, but are not limited to, public festivals, farmers markets, schools, fishing tournaments, conferences, and stakeholder meetings (e.g., Conservation clubs, boating clubs, angling clubs, lake & river groups, etc.).

[ ]  Share [**##**] AIS-related posts per month via social media to increase AIS awareness and reinforce prevention messaging.

* Submit screenshots of social media posts as part of reporting.

[ ]  Write [**##**] electronic newsletter(s) that provide AIS information, articles, and updates to partners.

* Submit newsletter as part of reporting.

[ ]  Share relevant AIS articles with partners and citizens for use in their newsletters.

* Submit a list of articles and specific groups the article was shared with.

## **Provide Surface Water Grant support.**

[ ]  Provide assistance to a grantee or apply for AIS Prevention and/or AIS Education grants.

* Assist AIS-related grant recipients with AIS education and outreach tools to ensure consistent messaging.

[ ]  Work with DNR AIS Biologist and grant applicant to apply for an EDR grant, if needed.

* Serve as authorizing representative for the EDR grant, if applicable.

## **Collect and report other physical data on lakes and lake ecosystems, including data on water levels and lake ice extent and duration.**

List the activity(ies) requested by DNR AIS Biologist and/or Lake Biologist:

* + - 1.
			2.

**Complete other activities in addition to selected scope activities.**

List the activity(ies) requested or agreed upon by DNR AIS Biologist:

1.

2.

|  |
| --- |
| **Section: Individual County**For [county name] County: By affixing signature below, the county swears that the document above accurately portrays the intent.By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature Title Date Signed |

|  |
| --- |
| **Section: Designated Agents and County agreements:** |
| **County Allocations** |  |  |
| [county name] County | $\_\_\_\_\_\_ |  |
| [county name] County | $\_\_\_\_\_\_ |  |
| [county name] County | $\_\_\_\_\_\_ |  |
| [county name] County | $\_\_\_\_\_\_ |  |
| **Total** | **$\_\_\_\_\_\_** |  |
|  |  |  |
| **Proposed Project Budget** |  |  |
| AIS Coordinator Salary  | $\_\_\_\_\_\_ |  |
| AIS Coordinator Fringe Benefits | $\_\_\_\_\_\_ |  |
| Salaries (Administration) | $\_\_\_\_\_\_ |  |
| Fringe Benefits (administration) | $\_\_\_\_\_\_ |  |
| Travel | $\_\_\_\_\_\_ |  |
| Supplies & Operating Expenses | $\_\_\_\_\_\_ |  |
| Contractual Services | $\_\_\_\_\_\_ |  |
| Equipment | $\_\_\_\_\_\_ |  |
| Other (describe in detail) | $\_\_\_\_\_\_ |  |
| **Total** | **$\_\_\_\_\_\_** |  |

Declaration:

By affixing our signatures below, we swear that the document above accurately portrays the relationship and intent of all parties.

|  |  |
| --- | --- |
| FOR [county name] CountyBy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature Title Date Signed | FOR [designated agent name]By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature Title  Date Signed |