Prevention Plan Review Check List (Version 1.3-6/30/22)

Agency/Tribe Region Date of Review

Plan Author WUI/Prev. Spclst. Reviewer

Instructions: Complete this checklist by hand, in blue ink. Answer each question as indicated. Use the check box at the left to designate items that must be corrected.

Is this a new WFPP or a Revised WFPP

 Does this plan appear to follow the “Standard Outline”? Yes \_\_\_No \_\_\_

 Are the pages numbered? Yes \_\_\_No \_\_\_

# Analysis Section

 What Document is this plan tiered to? Page # \_\_\_

 Does the plan contain “SMART” objectives for prevention? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is one objective for reduced occurrence measurable? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Was a collaborative process used and described? Yes \_\_\_No \_\_\_ Page # \_\_\_

Does it meet the CWPP Equivalency standards? Yes \_\_\_No \_\_\_

 Is there a basic description of the Management Unit (MU)? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is the fire history discussed? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is the primary cause(s) identified? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a discussion of historical prevention efforts? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is a Prevention Strategy described? Yes \_\_\_No \_\_\_ Page # \_\_\_

Does the prevention strategy address the primary cause? Yes \_\_\_No \_\_\_

 Is there a description of the MU Risk Assessment? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 1 – Composite Prevention Unit Assessment

Summary present? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a discussion of the Community Assessment? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 2 – Composite Community Assessment Ranking Yes \_\_\_No \_\_\_ Page # \_\_\_ present?

 Is there a discussion of fuels conditions? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a discussion of Structural Ignitibility? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 3 – Structural Ignitability Present? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Are the prevention Scenarios described? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a narrative describing the Workload Analysis Table? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 4 – Prevention Workload Analysis present? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a narrative describing the Effectiveness Analysis Table? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 5 - Effectiveness Table present? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a narrative describing the proposed budget? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 6 – Budget Summary present? Yes \_\_\_No \_\_\_ Page # \_\_\_

Is Table 7 – Program Support Items present? Yes \_\_\_No \_\_\_ Page # \_\_\_

 Is there a discussion of the Cost-Benefit analysis? Yes \_\_\_No \_\_\_ Page # \_\_\_

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# Implementation Section

## Program Policy Requirements

* Is there documentation of Program Support? Yes No Page#

Is a copy provided in Appendix A or B? Yes No Apx.

Is the Burn Permit System in place? Yes No Page #

Is it functional? Yes No

Is a copy provided in Appendix F? Yes No

* Do Fire Investigation Policies/Procedures exist? Yes No Page #

Is a copy provided in Appendix G? Yes No

* Is the Law Enforcement/Fire Investigation SOP in place? Yes No  Page #

Is a copy provided in Appendix C? Yes No

## Prevention Actions

 Are there narrative descriptions for the General Actions? Yes No Page #

Is Table 8 – General Actions provided? Yes No Page #

 Are there narrative descriptions for the Specific Actions? Yes No Page #

Is Table 9 – Specific Actions provided? Yes No Page #

 Are there narrative descriptions for the Community Actions if used? Yes No Page #

Is Table 10 – Community Actions provided if used? Yes No Page #

 Do the totals from these tables match those in Table 4 Yes No

 Are structural ignitability mitigation options discussed? Yes No Page #

 Are hazardous fuel treatment areas discussed and prioritized? Yes No Page #

 Are fuel treatment types and methods to be used discussed? Yes No Page #

 Is the Annual Planning Calendar (YAP) included in Appendix O? Yes No

 Are the required supporting plans discussed? Yes No Page #

If yes, are they provided as drafts or developed?

Sign Plan Draft \_\_\_ Developed \_\_\_

Patrol Plan Draft \_\_\_ Developed \_\_\_

Communications Plan Draft \_\_\_ Developed \_\_\_

Preparedness/Readiness Plan Draft \_\_\_ Developed \_\_\_

Restrictions Plan Draft \_\_\_ Developed \_\_\_

Additional Required Plans

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Draft \_\_\_ Developed \_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Draft \_\_\_ Developed \_\_\_

􀀀 Is the Program Accountability discussed? Yes\_\_\_ No \_\_\_ Page # \_\_\_

Are deadlines for accomplishment reports prescribed? Yes\_\_\_ No \_\_\_

# Appendices

* Is the standard list of Appendices followed? Yes No
	1. Documentation of program support Yes No
	2. Documentation of tribal support Yes No
	3. LEO SOP Yes No
	4. Planning Model printouts Yes No
	5. Preparedness Plan Yes No
	6. Burn Permit System Yes No
	7. INVF Policies and Procedures Yes No
	8. Restrictions Plan Yes No
	9. Smokey Bear Guidelines Yes No
	10. Accomplishment Reporting Forms Yes No
	11. Inspection Forms Yes No
	12. Communications Plan Yes No
	13. Patrol Plan Yes No
	14. Sign Plan Yes No
	15. Annual Planning Calendar Yes No
	16. Recommended Position Description(s) Yes No
	17. Electronic Copy of WFPP (Word processing

and PDF formats) Yes No

# Policy Compliance

 Is the most cost-effective scenario selected? Yes\_\_\_ No \_\_\_

 Is the recommended grade level or Standard Position Description

 appropriate for the complexity of the unit? Yes\_\_\_ No \_\_\_

 How many positions are requested? \_\_\_\_\_\_

 Are the “Communities at Risk” addressed in the Risk Assessment? Yes\_\_\_ No \_\_\_

 Is there a favorable program review? Yes\_\_\_ No \_\_\_

 Does the signature page contain spaces for the

 4 or 5 required signatures Yes\_\_\_ No \_\_\_

# Overall Plan Quality

 Are consistent numbers used throughout the plan for:

 Benefit-Cost? Yes\_\_\_ No \_\_\_

 Program Cost? Yes\_\_\_ No \_\_\_

 Proposed Workloads? Yes\_\_\_ No \_\_\_

 Are the Planning Model printouts consistent with

 The Workload Analysis? Yes\_\_\_ No \_\_\_

 Effectiveness tables? Yes\_\_\_ No \_\_\_

 Community Rankings? Yes\_\_\_ No \_\_\_

 General Actions? Yes\_\_\_ No \_\_\_

 Specific Actions? Yes\_\_\_ No \_\_\_

 Community Actions? Yes\_\_\_ No \_\_\_

 Is the grammar and punctuation acceptable, overall? Yes\_\_\_ No \_\_\_

**Identified required corrections:** [ Check Here If no Corrections are Needed ]

1.

2.

3.

4.

5.

If the above corrections are made, will this WFPP comply with Agency Policy? Yes No If the above corrections are made, will this WFPP be equivalent to a CWPP? Yes No

This WFPP is: Policy Complaint and Approvable ; Approvable pending changes with no re-review ; Not approvable as written and needs to be corrected, then re-reviewed \_.

Printed Name of Reviewer Signed Date