

Good Agricultural Practices

Fresh Produce Safety Plan for Field Practices



This document was developed in workshops with North Carolina growers to provide a framework for them to develop their own food safety plans. Each grower's conditions are different. Some may find that the plan does not adequately address their specific conditions. In those cases, the plan will need to be supplemented.

Developing a food safety plan requires knowledge of farming practices and best management practices training. Don't be afraid to consult with experts. Before attempting to develop a plan, growers should obtain training in Good Agricultural Practices (GAP) offered by NC Cooperative Extension or government and trade organizations. Remember, this is just the written plan. The most important part is implementing, checking, correcting, and documenting the activities.

Food Safety Plan

Farm Name

This plan follows the USDA Good Agricultural Practices and Good Handling Practices Audit Verification Checklist categories of General Questions, Farm Review (Part 1) and Field Harvest and Field Packing Activities (Part 2). Individual questions are indicated at the beginning of each policy section.

Commitment to Production of Safe Foods:

Farm name is committed to the production of safe and high-quality foods. We subscribe to the principle that the appropriate method to accomplish this is to minimize the microbial, chemical, and physical contamination of produce at all points of the production process. It is our goal to produce premium-quality fruit/vegetables using good agricultural practices to maximize quality and productivity. To accomplish this, the following documented food safety plan is implemented and will be followed by all employees, contractors, and visitors to **Farm name** production sites and facilities.

Suggestions to improve this plan are encouraged at any time. This plan will be reviewed and reapproved at least annually or at the beginning of the spring planting season.

Facility Address (Physical and Mailing):

Farm Information:

Farm name is owned by **Owner Name**, and was started in **add year**. **Farm name** is dedicated to the agricultural activities involved in the production, packing, and marketing of **list of all commodities produced**. Currently, we are farming **add number** acres. We own **add number** acres and lease the additional **add number** acres in production. *(Statement of other physical buildings operated in conjunction with this farm's operations could be included here, such as packing house square footage).*

Organizational Chart

Owners	Click here to enter text.
Manager	Click here to enter text.
Assistant Manager	Click here to enter text.
Food Safety Officer	Click here to enter text.
Packing House Manager	Click here to enter text.
Packing House Crew Manager	Click here to enter text.
Office and Bookkeeping Manager	Click here to enter text.
Shipping and Transportation	Click here to enter text.
Traceability and Documentation	Click here to enter text.
Contact Person	Click here to enter text.
Broker	Click here to enter text.

This plan will be considered current for one year following the date of the last review.
Authorized changes will be made in writing and recorded below.

Date	Section Changed	Effective Date	Authorized by
Date	Click here to enter text.	Date	Add name
Date	Click here to enter text.	Date	Add name
Date	Click here to enter text.	Date	Add name
Date	Click here to enter text.	Date	Add name
Date	Click here to enter text.	Date	Add name
Date	Click here to enter text.	Date	Add name
Date	Click here to enter text.	Date	Add name

Farm name authorizes/designates **Name** to make changes and oversee the implementation of this established food safety plan.

Name has participated in GAP/GHP trainings. **He/She** will be responsible for training employees and is provided with the authority and resources to fully accomplish this task.

All required documents are to be maintained at **farm name** offices.

All documentation logs will be maintained accordingly in the appendices.

By signing this document, I agree to adhere to all that is set forth in the Good Agricultural Practices Food Safety Plan.

Signature of Owner and Operator

Date