

Federal Award Identification Number

Recipient Name

The FDA's Cooperative Agreement Program for States and Territories to Implement a National Produce Safety Program Project Period: **20XX-20XX**

Project Plan

The *Project Plan* is the documentation of your plans and key tasks for each applicable Program Objective; as well as key accomplishments for each applicable Program Objective. Although the format provided is compartmentalized, your plan should “tie together” and be reflective of your jurisdiction’s *Assessment*.

Below is the suggested *Project Plan* outline; yellow highlight indicated data entry spaces. Changes to the *Project Plan* throughout this cooperative agreement must be tracked and explained in this document.

Program Overview

A statement with the program’s mission and vision. Summarize the expected outcomes of the project.

Enter data

Program Objectives

Objective 1: Program Documentation

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				
Enter data				

Key Accomplishments (listed/bulleated) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Objective 2: Program Administration

Position	Title	Name/Vacant	Calendar months funded by CAP	Responsibilities (Oversight/Manager/Supervise/Farm Inventory/Inspector/Administrative/Education Outreach/Other)
Enter data	Enter data	Enter data	Enter data	Enter data

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				
Enter data				

Key Accomplishments (listed/bulleted) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Objective 3: Education, Outreach and Technical Assistance

The plan should address how your jurisdiction will provide education to all non-exempt covered farms subject to the Produce Safety Rule; and to also provide education to all farms that are 1) Qualified Exempt and 2) Farms growing covered produce with up to \$25,000 of produce sales. Additionally, plans and accomplishments for education activities; outreach activities; and technical assistance activities should be distinct from one another. Your Assessment should guide your plans for education activities; outreach activities; and technical assistance activities within your jurisdiction.

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				

Enter data				
------------	--	--	--	--

Key Accomplishments (listed/bulleted) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Objective 4: Farm Inventory

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				
Enter data				

Key Accomplishments (listed/bulleted) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Objective 5: Inspection Program

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				
Enter data				

Key Accomplishments (listed/bulleted) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Objective 6: Compliance and Enforcement Program

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				
Enter data				

Key Accomplishments (listed/bulleted) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Objective 7: Produce Related Event Response Planning and Implementation

Overall Plans: Enter data

Key Milestone/Task	Planned Start Date	Responsible Party	Planned Completion Date	Status (not started/delayed/in-progress/completed/abandoned)
Enter data	MM/YYYY	Name and/or Title	MM/YYYY	Not started/delayed/in-progress/completed/abandoned
Enter data				
Enter data				
Enter data				

Key Accomplishments (listed/bulleted) and should directly correlate to plans/goals:

Year 1: Enter data

Year 2: Enter data

Year 3: Enter data

Year 4: Enter data

Year 5: Enter data

Budget Review

Utilize the excel Budget Tracker template to document your Budget. The Budget should be reviewed at least quarterly. This table should be used to document the review.

	Reviewed Date/Initials/Notes	Reviewed Date/Initials/Notes	Reviewed Date/Initials/Notes	Reviewed Date/Initials/Notes
Jul 1 2021- Jun 30 2022	Enter data	Enter data	Enter data	Enter data
Jul 1 2022- Jun 30 2023	Enter data	Enter data	Enter data	Enter data
Jul 1 2023- Jun 30 2024	Enter data	Enter data	Enter data	Enter data
Jul 1 2024- Jun 30 2025	Enter data	Enter data	Enter data	Enter data
Jul 1 2025- Jun 30 2026	Enter data	Enter data	Enter data	Enter data

The information below applies only to requirements of the Paperwork Reduction Act of 1995.

The burden time for this collection of information is estimated to average 36.67 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the address to the right:

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number."

Department of Health and Human Services
Food and Drug Administration
Office of Operations
Paperwork Reduction Act (PRA) Staff
PRASStaff@fda.hhs.gov

DO NOT SEND YOUR COMPLETED FORM TO THIS PRA STAFF EMAIL ADDRESS.