

# Cleanroom Workshop: Negotiating Regulatory Management with Real-World Experience

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# Disclosure

- ❖ All planners, presenters, and reviewers of this session report no financial relationships relevant to this activity.

# Objectives

- ❖ Define key elements and processes to achieve sterile compounding compliance using citations.
- ❖ Assess what compliance readiness means for compounding practices.
- ❖ Evaluate findings from other arenas (e.g., GMP) and discern what can be highlighted in your work areas.
- ❖ Given a scenario, discuss and incorporate best practices into the cleanroom workflow.

# Self-Assessment

- ❖ Which of the following is an indicator of a facility that is under a state of control?
  - a) Performance Qualification
  - b) Installation Qualification
  - c) Operational Qualification
  - d) Environmental Monitoring
  - e) a, b, and c

# Self-Assessment

- ❖ The most common citation in FDA audits (FY16 and FY17) were procedures?
  - True or False

# Self-Assessment

- ❖ What guidance document can be used as a reference to generate an Environmental Monitoring plan?
  - a) USP 795
  - b) USP 797
  - c) USP 800
  - d) ISO 14644, Table 2
  - e) EPA P-Listed Products

# Self Assessment

- ❖ Regulations are developed to ensure patient safety.
  - True or False

# The Challenge of Modern Pharmacy

- ❖ Regulatory agencies are discussing the intersection between manufacturing/large batch compounding (503b) and cleanrooms (503a)
- ❖ Insanitary conditions are being enforced by the US Food and Drug Administration to health-system (503a) pharmacies
- ❖ Lack of didactic courses on cleanroom management

The challenge is to learn from the principles of large batch production and apply it to a prescription of one



# Are you a 503a or a 503b

## 503a

- ❖ Compound according to prescriptions...
- ❖ ...for a specific patient...
- ❖ ...under USP guidelines...
- ❖ ...and does not produce a large batch.

## 503b

- ❖ Compound in large batches...
- ❖ ...with or without a prescriptions...
- ❖ ...that can be sold to end user...
- ❖ ...are subject to cGMP requirements...
- ❖ ...and must be registered with FDA.

# FDA Updates

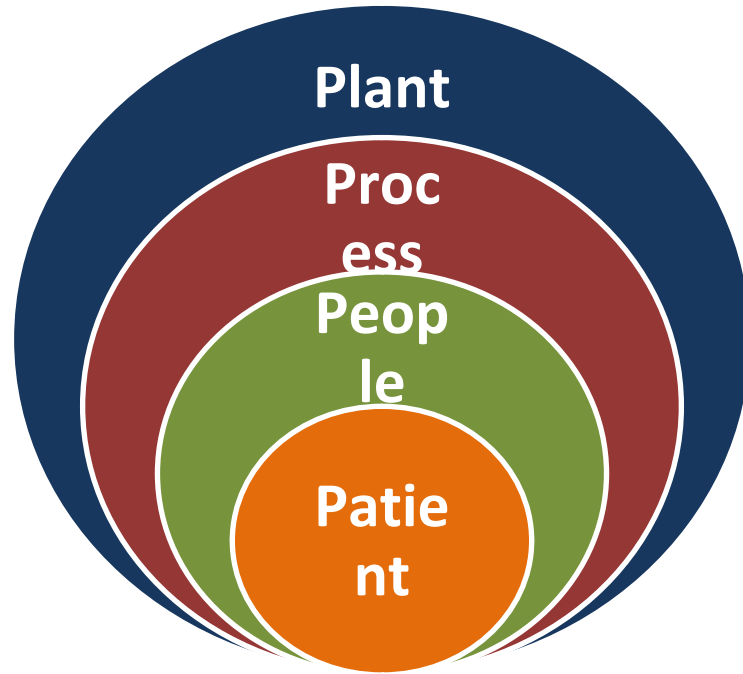
- ❖ ...FDA investigators will make a preliminary assessment of whether such entities are compounding their human drugs in accordance with certain conditions of section 503a...
- ❖ ...the investigator will not include observations that represent deviations solely from FDA's current good manufacturing practice (CGMP) requirements **unless** it appears, based on the investigator's preliminary assessment, that the firm compounds drugs that do not qualify for the exemptions under section 503a.
- ❖ ....**503a does not provide an exemption from the prohibition on insanitary conditions**...[the FDA]...will continue to include observations...that appear to constitute insanitary conditions...



# Insanitary Conditions

- ❖ Construction within the cleanroom
- ❖ Exposed skin in the ISO5
- ❖ Leaning into the ISO 5 hood
- ❖ Wood or other porous surfaces that can collect debris
- ❖ Drop tiles in the ceiling
- ❖ Pets in the pharmacy
- ❖ Employees leaving in gowning and then returning
- ❖ Not using a sporicidal agent regularly
- ❖ Mold, insects, foreign matter in the facility
- ❖ Water is your worst enemy

# The Three P's of Cleanrooms



# FY 2016 Inspection Observation Summaries

- ❖ The ten most common citations of 483s that translate to pharmacy are:
  1. Procedures not in writing, fully followed (147 occurrences)
  2. Absence of written procedures (85 occurrences)
  3. Environmental Monitoring System (78 occurrences)
  4. Calibration/Inspection/Checking not done (76 occurrences)
  5. Procedures for sterile drug products (70 occurrences)
  6. Cleaning/Sanitizing/Maintenance (65 occurrences)
  7. SOPs not followed/documented (49 occurrences)
  8. Equipment design, size, and location (48 occurrences)
  9. Training—operations, GMPs, written procedures (44 occurrences)
  10. Clothing appropriate for duties performed (39 occurrences)



# FY 2017 Inspectional Observation Summaries

- ❖ Top five common citations of 483s that translate to pharmacy:
  1. Procedures not in writing, fully followed (185 occurrences)
  2. Investigations of discrepancies, failures (100 occurrences)
  3. Absence of written procedures (91 occurrences)
  4. Written procedures not established/followed (68 occurrences)
  5. Training – operations, GMPs, written procedures (51 occurrences)



# Plant: Facility Design and Consideration

- ❖ Cleanroom foundations have five basic documents
- ❖ User Requirements Specifications (URS) and Basis of Design (BOD)
- ❖ Validation of process is broken down into four phases:
  - Design Qualification (DQ)
  - Installation Qualification (IQ)
  - Operational Qualification (OQ)
  - Performance Qualification (PQ)
- ❖ Should have the documents ready for an auditor
- ❖ Should reside with the QA Manager and updated regularly with new information as data is generated

# Plant: Facility Design and Consideration

- ❖ Cleanroom must not be designed like office spaces and need to be designed for singular purposes
- ❖ Designed with containment in mind (USP <797>/<800>) with increasing levels of sterility increasing as you approach ISO 5 space
- ❖ Built with a redundancy of systems and fail safes
- ❖ Cleanable and can withstand sporocidal agents
- ❖ Spread out of HEPA filters and returns around the room
- ❖ Separate by function and allow for cleaning/maintenance during normal operations



# Plant: Environmental Monitoring

- ❖ Air visualization studies (AVS) of the cleanroom and hoods
  - Goal of AVS in the hood vs the room
  - AVS should be conducted prior to initiating Environmental Monitoring Performance Qualification (EMPQ), but can be used to troubleshoot
  - Identifies the following:
    - Rooms are working properly and can help troubleshoot future problems
    - Identifies areas of stagnant air/eddies in the air
    - Ensures design criteria are functioning properly (doors seals, wall returns)
    - Identifies how items in the hood are impacting first air
  - Must be done under static and dynamic conditions

# Plant: Environmental Monitoring

## ❖ Environmental Monitoring Performance Qualification (EMPQ)

- Goal is to assure the building, after conducting a DQ/IQ/OQ/PQ can establish a state of control for producing medications
- Must meet non-viable particulate and viable particulates (bacterial and fungal)
- Completed once in a state of rest (no operations) and triplicate in dynamic conditions (performing normal duties)
- Helps establish environmental monitoring plan

Area of cleanroom (m <sup>2</sup> ) Less than or equal to	Minimum number of location to be tested (NL)
2	1
4	2
6	3
8	4
10	5
24	6
28	7
32	8
36	9
52	10
56	11
68	12
64	13
72	14
76	15
104	16
108	17
116	18
148	19
156	20
192	21
232	22
276	23
352	24
436	25
500	26
1000	27
>1000	Equation A

$$\text{Equation A} \text{ ---- } N = 27 \left[ \frac{\text{Area}}{1000} \right]$$



# Plant: Facility Cleanliness and Operations

- ❖ No insanitary conditions to ensure protection of the patient
- ❖ Ensure every surface is cleaned regularly
- ❖ Create a checklist and place in your cleanroom management solution (including light fixtures, examination of the surfaces)
- ❖ Document all regular cleaning tasks and issue remediation when not completed

## Activity: Design a cleanroom

- ❖ At your table, please take a paper and create cleanroom design given your experiences based on the random geometric shapes.
- ❖ Must have six LAF, four BSC, and two Genetherapy Rooms with unidirectional flow (10 minutes)
- ❖ Rotate one table and provide recommendations (5 minutes)

# Practice Reflection

- ❖ What did you learn from this activity that you will take back to your practice?
- ❖ What “big idea” can you take back and apply immediately?

# Process: Policy and Documents

- ❖ **IMPORTANT:** Write, train, test, and audit policies
- ❖ Conduct a USP 797/800 assessment
- ❖ Conduct a gap assessment for each area and ensure answers are appropriate for each area
- ❖ Review all policies as a part of the gap assessment
- ❖ Regularly query staff and observe
- ❖ Conduct ongoing assessments of the staff is essential to ensure a state of readiness for regulatory bodies

# Process: Daily Controls

- ❖ Utilize a technology solution to evaluate daily tasks that need to be completed
- ❖ Automate responses to send emails to phones when not completed
- ❖ Take the checklist of daily activities and conduct daily QA of all activities expected in the area
- ❖ Document all audits and QA activities in your Quality Management System

## Activity: Cleanroom Learnings

- ❖ At your table, please take a paper and list all the lessons learned from your own cleanroom experience (10 minutes)
- ❖ Use tick marks to vote and identify the top three impactful lessons
- ❖ Select a spokesperson to present the three highest rated lessons learned from your table (5 minutes)



# Practice Reflection

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# People: Employee Training

- ❖ Staff are the variable to manage
- ❖ Staff follow the policies
- ❖ Proposed USP <797> training qualification
  - Initial triplicate qualification for media fill and glove finger samples
  - Quarterly qualification retesting
- ❖ Establish regular rounds for visual inspection and understand the challenges staff encounter
- ❖ Consider having an outside consultant come evaluate the operations

# People: Garbing

- ❖ Provide hospital-laundered scrubs and ensure new scrubs are replaced daily
- ❖ Upon leaving the facility, staff must be wearing an overcoat on top of their scrubs
- ❖ Keep water out of the ISO 8, consider dry gowning
- ❖ Do not use air hand driers
- ❖ Gel after washing, before gloves
- ❖ Utilize sterile gloves and sleeves in the ISO 5 spaces
- ❖ Provide a mirror for self evaluation, hair and skin not showing

# Essential Roles in the Pharmacy Department

- ❖ IV Supervisor (should not be a shared responsibility)
  - Required by USP <797>
  - Reviews all reports, trends, and examines operations
- ❖ IV Shift Leads
  - Responsible for upholding the integrity of the daily operations
  - Need to be in the space working with the team AND able to observe regularly
- ❖ IV Quality Assurance
  - Ensures compliance with relations and conducts regular audits
  - Ensures ongoing Quality Management System Development
  - Utilize a microbiologist to review and trend environmental monitoring data

# Activity: Cleanroom Learnings

- ❖ Four groups
- ❖ Open your bags and follow the instructions



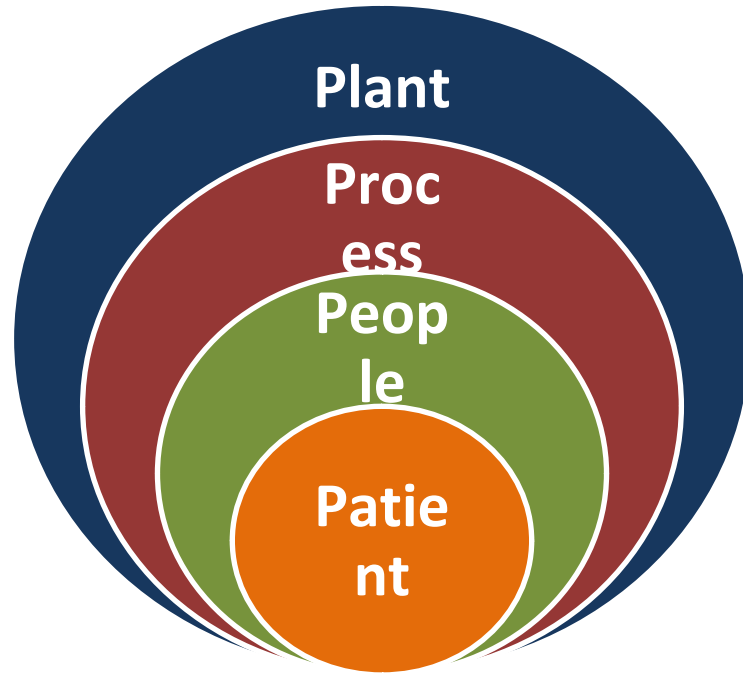
# Practice Reflection

- ❖ What did you learn from this activity that you will take back to your practice?
- ❖ How can a process be circumvented?

# Patient Safety

- ❖ Cleanroom management is about managing the three P's
  - Plant
  - Process
  - People
- ❖ Regulation was born out of necessity
  - Failures that impacted patient care necessitated a regulation
  - Not a checklist – it is patient safety
- ❖ Remember to examine areas outside of your pharmacy where medications may be inappropriately mixed
- ❖ We should never lose sight of the goal of what may seem as extra steps...the **patient**

# The Three P's of Cleanrooms





# Key Takeaways

- ❖ Our cleanrooms need to be evaluated from the three P's
  - Run through each of these in your system
  - Work them backwards from the process and review SOPs
- ❖ Our staff's engagement is the best solution to running a compliant cleanroom
- ❖ Writing policy for a process vs showing a process for a policy are two different things

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