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RWANDA FDA Rwanda Food and Drugs Authority	Title: **SOP FOR GMP DESK ASSESSMENT OF PHARMACEUTICAL MANUFACTURING FACILITY**	

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1.0 Purpose

This Standard Operating Procedure is to ensure that:

1.1 To ensure that desk assessment of applications for Good Manufacturing Practice compliance for pharmaceutical manufacturing facilities is consistently done prior to issuance of a GMP certificate

1.2 To outline a process for desk assessment of GMP compliance of overseas facilities to identify instances where an acceptable level of GMP compliance can be confirmed and assured from the activities of another regulatory authority or authorities without the need for an onsite inspection.

1.3 To help Rwanda FDA to make optimal use of inspection resources.

2.0 Scope

This Standard Operating Procedure:

2.1 Applies to all pharmaceutical manufacturing facilities which are located in countries with Stringent Drug Regulatory Authorities (SRA) and sites approved by World Health Organization or EAC NMRAs

3.0 Policy

3.1 Law No. 003/2018 of 09/02/2018 establishing Rwanda FDA, determining its mission, organization, and functioning states in:
Article 8 (2) ...” regulate compliance with quality standards relating to the manufacture”; and
Article 9 (2) …” grant or withdraw authorization relating to matters regulated under this law”.

4.0 Definitions and Abbreviations

4.1 **Author**” The Author shall be the person(s) who created a document or any subsequent revision of the controlled document.

4.2 “**Approved by**” Endorsement providing authority for a document to become officially valid and to be put into formal use.

4.3 “**Checked by/ Authorised by**” Endorsement signifying that the internal document is ready for approval

4.4 “**Controlled Copy**” A document which is distributed to pre-determined persons or staff and if any change or revision is made on the document, the Quality Management Systems Specialist shall submit the revised document and make sure that the previous (superseded) document is retrieved,

4.5 “**Document**”

a) “Document” means readable information and its supporting medium.

b) A “document” describes any policy, procedure, work instruction or form that is to be controlled.

c) A “document” can be a Law, Regulation, standard, policy statement, manual, guideline, protocol, process flow outlines, standard operating procedure, work instruction, drawing, specification, form, record, chart, report, certificate, checklist, aide memoir, register, worksheet, textbook, poster, notice, memorandum, software, photograph, drawing, or plan.

d) A “document” may be on various media e.g. paper, magnetic, electronic or optical computer disc, and may be digital, analog, photographic or written.

4.6 “**Effective Date**” A date after the concerned staff or persons have been formally trained or notified or oriented on the use of the document and records maintained, but shall not be later than 15 working days from the revision date.

4.7 “**External Document**”

a) A legal, regulatory or technical document which is not written or created (not internally generated), issued or revised by Rwanda FDA.

b) "External document" can be used as reference in writing internal documents or as a manual for operating equipment.

4.8 "**Internal Document**": A document which is issued and revised by Rwanda FDA.

4.9 "**Master Document**" Original of a controlled internal document that contains original signatures of the authorities that checked/authorized and approved the document.

4.10 "**Objective**" A brief statement(s) describing the purpose of the document.

4.11 "**Policy**" A short statements derived from the applicable law(s), regulation(s), standard(s), resolutions(s), decision(s) or concept(s) that govern the document or provide a mandate or basis for the document.

4.12 "**Procedure**"

When used as a title, e.g. in a Standard Operating Procedure (SOP), or Work instruction, a procedure shall be written as follows:

1) Write clear, concise, step-by-step instructions on how to perform the procedure.
2) Write the instructions chronologically for the user to follow, without a lot of theoretical background.
3) Indicate the preliminary steps that must be done before beginning the actual procedure.
4) Number each step so that repeat steps can be referred to rather than making the SOP very long.
5) Number each sentence so as to make reference to it easy under document revision history when it is revised.
6) Include explanations and an example of how to do any required calculations.
7) Create and indicate the Form(s) where the results, observations or data should be recorded.

4.13 "**Responsibility**" indicates the designations or titles of the Rwanda FDA staff or member and briefly describe their specific responsibilities in performing the procedure in a document and in ensuring that the document is implemented and performed correctly and consistently.

4.14 "**Review Due Date**"

A date three years from the effective date, to ensure continued adequacy and suitability of a document. A document may remain valid beyond its review due date if no major change had happened in the process, until the revised document is authorized.

4.15 "**Review**"

Assessment of the correctness, suitability and adequacy of a document including technical, legal, regulatory, health, safety, and environment compliance issues.

4.16 "**Reviewer**"
The Reviewer shall be the person(s) who assesses a document for technical, legal, regulatory, health, safety, and environment compliance issues as per Section 9.3 of the Document Control SOP number QMS/SOP/001.

4.17 "**Revision Date**" The date when the document is approved and thereby becoming officially valid.

4.18 "**Revision Number**" A numerical figure that changes serially; the first document shall have revision number "0" and its first revision number "1", second revision number "2" and so on.

4.19 "**Safety Precautions**" When used in a procedure e.g. SOP, indicate all safety precautions that must be taken before the procedure is performed. Includes special precautions and protective garments (containment facility clothing, masks, hoods, goggles, gloves, cleanup of spills, etc.) for working with physical, chemical, radioactive, biological or microbiological hazards.

4.20 "**Scope**" A brief statement of where the document applies, when it need to be applied and any limitations of the document.

4.21 "**Title**" A title shall be a short, precise statement representing the contents of the procedures

4.22 "**Uncontrolled Copy**"
A document which is issued to persons or staff who are not part of the distribution list for that document for information purposes only and if any change or revision is made on the document, the Quality Management Systems Specialist is not in control of retrieval of the previous (superseded) document.

4.23 **"GMP"**
Good manufacturing practice (GMP) is a system for ensuring that products are consistently produced and controlled according to quality standards.

4.24 **Desk assessment**

Process which involves submission of documentary evidence by the applicant and the evidence provided is assessed to determine the level of compliance based on the accepted standard and the scope of the application.

5.0 Responsibility

5.1 The Director General is responsible for consideration and approval of GMP certificates
5.2 Head of Food and Drugs Inspection & Safety Monitoring Department is responsible for ensuring that the review and assessment of GMP applications is done as per this procedure.
5.3 The Division manager, Food and Drugs Inspection & Compliance is responsible for coordinating the assessment activities.
5.4 Quality assurance analyst ensures the use of update version of the SOP, recalls obsolete documents and keeps document master list.
5.5 GMP Inspectors are responsible for adherence to this procedure and maintaining records arising out of this procedure.

6.0 Distribution

6.1 Director General
6.2 The Head of Food and Drugs Inspection and Safety Monitoring Department
6.3 Division Manager of Food and Drugs Inspection and Compliance
6.4 Quality assurance analyst
6.5 GMP Inspectors.

7.0 Safety Precautions

Not applicable to this SOP

8.0 Materials and Equipment

8.1 Rwanda FDA GMP database
8.2 GMP Desk Assessment Checklist
8.3 WHO prequalified sites
8.4 Updated list of countries considered as Stringent Regulatory Authorities (SRA)
8.5 EAC NMRAs

9.0 PROCEDURES

9.1 Receiving GMP Applications

9.2 Applicants submit their applications with relevant attachments as per guidelines on good manufacturing practices for finished pharmaceutical products No DIS/GDL/002in duplicate at Rwanda FDA head office central secretariat and a copy of such application is stamped "Received" and returned to the applicant as a reference.

9.3 The received application is recorded with a reference number and a copy is filed at the central secretariat and sent to the Head Food and Drugs and safety monitoring department within prescribed time.

9.4 For online applications, the dossier is submitted via Rwanda FDA email: info@rwandafda.gov.rw and the application is acknowledged by the central secretariat

9.5 The central secretariat downloads and creates the file on Rwanda FDA server for reference purpose before the application file is submitted to Head of Food and Drugs and Safety Monitoring Department.

9.6 Upon receipt of the applicant's file, the Head of Food and Drugs inspection and Safety Monitoring Department assigns it to the Food and Drugs Inspection and Compliance Division Manager who records the application in the relevant Food and Drugs Inspection and Compliance incoming dossier database and further assign it to the GMP Inspectors for assessment.

9.7 Screening of the application:

9.8 GMP Inspectors verify the completeness of the relevant attachments as mentioned in guidelines on good manufacturing practices for finished pharmaceutical products

9.9 The GMP Inspector prepares and submit a feedback to the Division Manager based on screening findings in case the application is not complete.

9.10 The Division Manager reviews the feedback and submit it to the Head of Food and Drugs Inspection and Compliance Department for approval and submission to the applicant.

9.11 Assessment of the Application:

9.12 In case the application is complete the dossier undergoes the first assessment.

9.13 After the first assessment, the Division Manager assigns the second assessor.

9.14 The Second assessor submits the assessment report to the Division Manager

9.15 The Division Manager schedules the assessment report for committee review and validation.

9.16 The Head of food and drugs inspection and safety monitoring department shall forward the completed report together with GMP certificate of compliance (only for manufacturing sites rated as GMP compliant) for endorsement by Director General.

9.17 The endorsed report, GMP Certificate shall be scanned and emailed to the contact person at the manufacturing site.

9.18 Where queries are made and/or additional information is required, the assessment shall be deferred and communication formerly made to the manufacturing site to provide responses to queries and/or the required information.

9.19 Responses to queries and/or additional information submitted by the applicant shall be received and evaluated.

9.20 After evaluation, the completed desk assessment report with a recommendation to either approve or reject shall be submitted to the Division Manager for checking.

9.21 Any Desk review assessment with critical or major deficiencies, on-site inspection is scheduled.

10.0 Records

10.1 GMP Desk Assessment Checklist, GMP Desk Assessment report and GMP Certificate, documents shall be kept and maintained by the Head of Food and Drugs Inspection and Safety Monitoring Department for a period specified in the respective document

11.0 References

10.0 Guidelines on GMP Inspection of Foreign Pharmaceutical Manufacturing Facilities, Doc. No. INS/GDL/029.

10.1 Writing and Peer review of GMP Report and Follow-up of non-compliances, Doc. No. INS/SOP/015.

12.0 Appendices

11.1 GMP Desk Assessment Checklist, Doc. No. INS/CLT/013.

11.2 Content of GMP Desk Assessment Report

11.3 GMP Desk Assessment Flow Chart, Doc. No. INS/CHT/005

12.0 Document Revision History

Date of revision	Revision number	Author(s)	Changes made and/or reasons for revision
16 Jul 2021	0	Rwanda FDA Staff	First Issue

End of Document

Annex 1: GMP Desk Assessment Checklist

No	Rubric	YES/ NO	COMMENTS
1	Application letter addressed to DG of Rwanda FDA		
2	Filled and signed application form		
3	Proof of payment of prescribed fees		
4	Site master file (Annex 14, WHO Technical Report Series, No. 961) that is not older than one year from its approval date and any forecasted modifications, including legible colored printouts of water treatment, air-handling systems, including pipeline and instrumentation drawings (P&IDs) in A3 or A2 format		
5	Current manufacturing license		
6	Current GMP Certificate (GLP, ISO/IEC 17025 accreditation Certificate or WHO prequalification for outsourced laboratory)		
7	List of all the products (medicinal or other) manufactured on site and List of products intended for supply in Rwanda. The lists should include proprietary names and international non-proprietary names (INN).		
8	Copy of the recent GMP inspection report done by Local medicine regulatory authority and recent GMP inspection report from PIC/S SRA/WLAs or EAC NMRAs if available with a certified translated copy where this is not in English or French or Kinyarwanda.		
9	A copy of any warning letter or equivalent regulatory action issued by any authority to which the site provides or has applied to provide the product.		
10	Corrective and preventive action (CAPA) and proof of CAPA implementation related to the inspection report observations/deficiencies.		

11	The most recent product quality review(s) (PQR)(s) of the concerned product		
12	A confirmation by the senior quality assurance representative that a full self-inspection or external audit dedicated to the product(s) has been performed and all matters dealt with		
13	Quality Manual/Laboratory Manual or equivalent		
14	The completed batch manufacturing/packaging record(s) including the analytical part for the most recent released batch of relevant product(s)		
15	A list of any recalls or any Market complaints register in the last three years.		
16	Aseptic validation report (Required for products applied for that are not terminally sterilized).		
17	Contract or agreement between the FPP or API manufacturer and the outsourced testing laboratory or sterilization institution (for Outsourced testing laboratory; and Outsourced sterilization)		
	GENERAL RECOMMENDATIONS		

Done at……

On ……..

REFERENCE:

1.Guidelines on Good Manufacturing Practice for Finished Pharmaceutical Products (Pages 71 to 72)

Annex 2: Content of GMP Desk Assessment Report

Site information	• Name and address of the manufacturing site under assessment • Further details, if available/applicable such as building number/GPS location/UFI. • Name and contact details of site contact
Regulatory authority performing the assessment	• Name of the regulatory authority performing the assessment • Name and job title of the person performing/responsible for the assessment • Date of the assessment • Name and Signature of the person responsible for/endorsing the assessment
Scope of assessment	• A statement that the assessment of GMP compliance is being performed under the Rwanda FDA Scheme • Specific products/dosage forms that are within the scope of the assessment • Activities that are within the scope of the assessment (e.g. manufacture of API/non-sterile finished product/sterile finished product/biological finished product; packaging; importation etc.).
Basis for the assessment (Review of documentation)	•A list of documents reviewed as part of the assessment including versions/dates • Date, scope and outcome of the last inspection by PIC/S, SRA/WLAs or EAC NMRAs

	• Confirmation that the GMP certificate (where available) or inspection report covers the products and activities that are of interest to the regulatory authority performing the assessment
Assessment outcome and rationale	For example: • "Based upon the collected information, along with the oversight of the operations by the Participating Authority in the country in which the site is based, no onsite inspection by Rwanda FDA is considered to be required at this time. A new GMP certificate can be issued." • Due to the following "summary of risk factors" , an onsite inspection is considered to be required.

Annex 3: GMP Desk Assessment Flow Chart