

IQPP Plasma Center Audit Report Form and Checklist

Version 7.0 Effective April 1, 2015





IQPP Plasma Center Audit Report Form Version 7.0

Auditor	
Plasma Center	
Government Authority Identific	ation
PPTA ID#	
Telephone	Fax
Manager	
Medically Qualified Person	
Person Responsible for Quali	y Assurance
Date of audit	Start Time
	(approx.) End Time
Other regulatory and governm	ent-agency approvals
	ndards
Auditor Recommendation:	[] For Certification/Recertification
[] For Certification/Recertifica	ion, pending resolution of issues listed on report form,
Section(s) Page(s)	
[] Significant issues listed on	eport form,
Section(s)/Page(s)	
[] Recommend Re-audit withi	n days.
PPTA Review	Date Reviewed



Auditor's Statement

As an Auditor for the International Quality Plasma Program (IQPP), I shall not, either directly or indirectly, for myself or for the benefit of or in conjunction with any other person, corporation, partnership, association, agency, department, or other legal entity, use, communicate or otherwise disclose, or permit to be disclosed, any Confidential Information relating to this audit or plasma center without prior written consent of such plasma center; provided, however, Auditor may, only to the extent reasonably necessary or appropriate to the performance of Auditor's duties, disclose such Confidential Information to PPTA or an employee of PPTA for use in the IQPP Certification or a person to whom disclosure is otherwise required by applicable state or federal law or regulation.

All information obtained during audit will be forwarded to PPTA to be made a part of the plasma center's IQPP certification file.

As a consultant appointed by PPTA to perform this plasma center's IQPP audit, I hereby attest that to the best of my knowledge no conflict of interest exists between my current clients and the audited plasma center and/or PPTA.

As a consultant for the purposes of performing the IQPP audit of said plasma center, I certify that the attached audit findings and comments are true and accurate findings based on my observations and record review during the audit.

Auditor Signature	Date
POST AUDIT REVIEW	
•	or has reviewed the observations listed in this report. My signature does not any of the observations made by the Auditor.
Company Representative	Date
Title	Center Name/Location



IQPP Plasma Center Audit Checklist Version 7.0

A – Qualified Donors, Donor Record File (DRF) Review & Donor Privacy					
#	Audit Question	Yes	No	Ranking	
1.	For Applicant Donors, does the plasma center conduct screening including a physical examination completed by a Physician or Physician Substitute in accordance with all applicable regulatory and IQPP screening and testing criteria?			Major	
2.	Does the plasma center reclassify an Applicant Donor to a Qualified Donor based on the successful passing of the following within the minimum time interval between donations and no later than six months after the previous screening? a. Physical examination. b. NDDR check. c. Two donor screenings. d. Tested non-reactive for two sets of testing for HIV, HBV and HCV (based on all applicable regulatory and IQPP requirements) from donations and/or sample only collection.			Critical	
3.	Is the classification of a person as a Qualified Donor administered by plasma centers operated under the same SOPs and utilizing the same database(s) to make such determinations?			Major	
4.	Does the plasma center have a system in place to control Applicant Donor units and ensure they are not shipped for use in manufacturing of therapeutic products?			Major	
5.	If a Qualified Donor does not return for donation within six months of their previous donation, is the donor re-classified as an Applicant Donor?			Critical	
Aud	itor Comments on Section A:				



#	B - Community-Based Donor Population # Audit Question Yes No Ranking					
	· · · · · · · · · · · · · · · · · · ·	Yes	No	Ranking		
1.	Does the plasma center have a system to identify potential donors who are outside the Donor Recruitment Area?			Minor		
2.	Does the plasma center have a current (no more than one			Minor		
۷.	(1) year old) list of unacceptable addresses available for			IVIIIIOI		
	donor screening?					
3.	Does the plasma center update this list every time it			Minor		
Ο.	becomes aware of an unacceptable address?			IVIIIIOI		
4.	Does the list cover all areas from where donors are			Minor		
•	recruited/accepted?			17111101		
5.	Does the plasma center verify the donor's address against			Minor		
-	the unacceptable address list (initially and annually)?					
6.	Does the plasma center reject donors when the donor's			Major		
	address is a known hotel, mission, homeless shelter or					
	transient camp?					
7.	Does the plasma center require new donors to provide			Major		
	valid photo identification issued by an employer,					
	educational institution or government authority?					
	residences outside the plasma center's defined Donor Recruitment Area?					
Audi	itor Comments on Section B:					



C -	C – National Donor Deferral Registry or centralized donor deferral registry usage						
#	Audit Question	Yes	No	Ranking			
1.	Does the plasma center check all Applicant Donors or			Critical			
	donors being processed as Applicant Donors against the						
	National Donor Deferral Registry?						
2.	Is the response (verification code) provided by the NDDR			Major			
	system recorded and traceable to the donor?			_			
3.	Where applicable, are donors that are intentionally			Major			
	collected for anti-HIV, HBsAg, or anti-HCV positive units						
	under a government-approved collection program checked						
	against the NDDR and added to it if necessary?						
TON	E: The following questions do not apply to companies using a	n integ	rated	system			
shar	ed by their centers and the NDDR Data Entry Site/Laboratory.						
4.	Is there a position responsible for providing donor			Major			
	information to the NDDR Data Entry Site within three (3)			_			
	business days of receiving positive test results?						
5.	Is donor information input into the NDDR within three (3)			Major			
	business days of notification of donor information?						
Audi	tor Comments on Section C:						



D – Donor Education						
#	Audit Question	Yes	No	Ranking		
1.	Does the plasma center have an electronic, paper or video-based education system (or materials) to help donors address risk behavior?			Major		
2.	Is the donor's comprehension of the information assessed initially in order to assure their understanding of risk behavior?			Major		
3.	Does the plasma center provide materials (e.g., electronic, paper or video-based) to educate the donors, on their initial visit, on general well-being practices for plasma donation as directed by the corporate office?			Minor		

Auditor Comments on Section D:

A 114 O 41		E – Personnel Education and Training					
Audit Question	Yes	No	Ranking				
Do the plasma center records reflect that the corporate training guide is being implemented and that the records are up to date?			Major				
Do all plasma center employees have documented annual GMP training?			Major				
Is there documentation on file (such as a diploma, GED equivalent, college/university transcript or professional license) demonstrating that plasma center employees (with a functional job related to donor screening, plasma collection, product handling or other similar functions) have attained the minimum level of education required in the Standard?			Minor				
	Do the plasma center records reflect that the corporate training guide is being implemented and that the records are up to date? Do all plasma center employees have documented annual GMP training? Is there documentation on file (such as a diploma, GED equivalent, college/university transcript or professional license) demonstrating that plasma center employees (with a functional job related to donor screening, plasma collection, product handling or other similar functions) have attained the minimum level of education required in the	Do the plasma center records reflect that the corporate training guide is being implemented and that the records are up to date? Do all plasma center employees have documented annual GMP training? Is there documentation on file (such as a diploma, GED equivalent, college/university transcript or professional license) demonstrating that plasma center employees (with a functional job related to donor screening, plasma collection, product handling or other similar functions) have attained the minimum level of education required in the Standard?	Do the plasma center records reflect that the corporate training guide is being implemented and that the records are up to date? Do all plasma center employees have documented annual GMP training? Is there documentation on file (such as a diploma, GED equivalent, college/university transcript or professional license) demonstrating that plasma center employees (with a functional job related to donor screening, plasma collection, product handling or other similar functions) have attained the minimum level of education required in the Standard?				

Auditor Comments on Section E:





F-P	Professional Plasma Collection Facility			
#	Audit Question	Yes	No	Ranking
1.	Is the building structurally sound and showing no evidence of loss of exterior integrity?			Major
2.	Are windows and doors maintained in good repair?			Minor
3.	If windows are open, is adequate screening in place to prevent insects, debris, etc. from entering the plasma center?			Minor
4.	Is the building and its immediate exterior surroundings kept free of litter and debris?			Minor
5.	Does the plasma center follow company policies regarding littering, loitering and smoking in and about the plasma center and are they effectively implemented and enforced?			Minor
6.	Is the area in which the dumpster is located free of waste?			Minor
7.	Does the entrance to the center control the flow of donors into the plasma center?			Minor
8.	Is the plasma center configured in a way that prevents public access to the unauthorized areas of the building?			Major
9.	Do entrances, exits and applicable parking areas have adequate lighting?			Minor
10.	Is seating adequate to avoid the overflow of donors into aisles, doorways, the outdoors or other areas of the plasma center outside of the designated waiting area (except during peak periods)?			Minor
11.	Are all areas of the plasma center configured to provide for safe and proper operation?			Major
12.	Is signage, if present, professional in appearance and maintained in good order?			Minor
13.	Are temporary signs such as posters and banners for promotional campaigns professional in appearance and maintained in good order?			Minor
14.	Are all surfaces (walls, floor, ceiling, etc) maintained in a clean and sanitary manner and kept in good repair?			Minor
15.	Is interior lighting adequate and maintained in good operating order?			Minor
16.	Are there separate restrooms facilities available for staff use?			Minor
17.	Are donor restroom facilities maintained in a clean manner, in good repair and easily accessible to donors?			Minor
18.	Are adequate supplies for hand washing and sanitary purposes available in all restroom facilities and appropriate areas?			Minor
19.	Are the cleaning supplies in an appropriately sanitary state or condition?			Minor



20.	Do records indicate that storage areas are kept clean and at their appropriate temperature levels?	Minor	
21.	Are storage areas adequate in size to contain all supplies necessary for plasma center operation?	Minor	
22.	Are supplies stored in areas of the facility which are accessible only to authorized personnel?	Minor	
23.	Is the infectious waste storage area accessible only to authorized personnel?	Major	
24.	Are there procedures in place preventing donor access to manufacturing records, supplies, plasma units and corresponding samples?	Major	
25.	Does the plasma center maintain Donor Record Files and information in a confidential manner to ensure access by authorized personnel only?	Major	
Adi			

Auditor Comments on Section F:



G – Complaints						
#	Audit Question	Yes	No	Ranking		
1.	Does the plasma center follow company procedures			Major		
	regarding customer and/or donor complaints?					

Auditor	Comments	on	Section	G:
/ tualtoi	Committee	OH	OCCUOI	\circ .

H – Release Procedures						
#	Audit Question	Yes	No	Ranking		
1.	Does the plasma center follow company procedures			Critical		
	regarding stopping the release of plasma for shipment, if					
	necessary?					
2.	Does the plasma center follow company procedures			Critical		
	regarding the specific checks that must be verified as					
	acceptable before plasma units are released?					
3.	Is final plasma release controlled by Quality Assurance			Critical		
	personnel or a qualified alternate?					

Auditor Comments on Section H:





I – Viral Marker Standard				
#	Audit Question	Yes	No	Ranking
1.	Has the plasma center been placed on the Viral Marker Alert List since the previous IQPP audit?			N/a
	If yes, answer question 1A – 1B below.			
1A.	Is a copy of the corrective and preventive action (CAPA) plan response available at the plasma center?			Major
1B.	Has the corrective and preventive action (CAPA) plan been implemented?			Major
2.	Are the data in the Donor Record File consistent with the Viral Marker data reported?			Major
3.	Are the reactive data at the center consistent with the viral marker data reported?			Major

Auditor Comments on Section I:



J – Cross Donation Management Standard				
#	Audit Question	Yes	No	Ranking
1.	Does the plasma center enter into the CDCS information in accordance with the Standard?			Major
2.	Does the plasma center conduct donor checks in accordance with the requirements in the Standard?			Major
3.	Does the plasma center keep records of its donor checks in accordance with the Standard?			Major
4.	If a donor is found to be donating in more than one center, and not exceeding the maximum allowable limits for donating, is the donor informed about the health risks of donating more frequently than is allowed by regulation and the reasons for the center's concerns for the donor's health if cross donating should occur?			Major
5.	If a donor is found to be cross-donating, is the donor permanently deferred?			Major
6.	Does the center follow the Backup Process in accordance with the Standard?			Major

Auditor Comments on Section J.



K – Standard for Recording Donor Adverse Events				
#	Audit Question	Yes	No	Ranking
1.	Does the center follow the company's approved process for recording known DAEs considered to be associated with any part of a Source Plasma donation program?			Major
2.	Does a licensed center physician or physician substitute classify all DAEs in accordance with the DAE Classifications list in the Standard, utilizing the available information and his/her best medical judgment?			Major
3.	Does the center's oversight program include monitoring of asterisked records to confirm compliance with the definitions in the standard?			Major

Auditor Comments on Section K:



List any GMP concerns:	
Conseq Overall Comments	
General Overall Comments:	



Ranking Guidelines:

Critical Observations = 50 points each
Major Observations = 10 points each
Minor Observations = 2 points each

Scoring Guidelines:

0 – 20 points – Next IQPP audit will take place in three (3) years. 21 – 50 points – Next IQPP audit will take place in two (2) years.

51 points or more — Will trigger a procedure in which a re-audit in less than

two years may occur.