

Principles for Use

- When outsourcing sterile products preparation services, every hospital/health system-based department of pharmacy should take a comprehensive and organized approach to vendor selection.
- Departments of pharmacy are strongly encouraged to engage other key hospital/health system stakeholders in the vendor selection process.
- While this tool is intended to be useful for all health-system/hospital-based departments of pharmacy, its
 use will vary based on the institution's size, geographic location, services provided and available
 resources.
- The ASHP Foundation has attempted to include the assessment questions under the most appropriate category. However, in some cases an assessment question might be applicable to multiple categories.
- While this document is intended to be helpful to hospital/health-system departments of pharmacy in their selection of a sterile products outsourcing organization, it does not purport to establish a standard of care.
- Hospitals/health systems that plan to use this tool as a component of their evaluation of a sterile
 products outsourcing organization can also use the tool to develop a Request for Proposals (RFP) for
 these services.
- The ASHP Foundation strongly encourages hospitals/health systems to use this tool along with site visits to ensure a comprehensive review of potential sterile products outsourcing organizations. Items that should be closely evaluated during the site visit are indicated throughout the tool.
- As part of the hospital's/health system's overall planning for selection of a sterile products outsourcing organization, see the ASHP Guidelines on Outsourcing Sterile Compounding Services.
- The term "disqualification" as used in this tool means that the outsourcing contractor should not be considered for the provision of sterile products preparation services.
- This tool is not intended for use in the evaluation of nuclear pharmacies.

The information contained in this self-assessment tool is constantly evolving because of ongoing research and improvements in technology and is subject to the professional judgment and interpretation of the involved health care professionals. The ASHP Research and Education Foundation, the expert panel, and external peer reviewers have made reasonable efforts to ensure the accuracy and appropriateness of the information presented. However, any reader of this information is advised that the ASHP Research and Education Foundation, the expert panel, and the external reviewers are not responsible for the continued currency of the information, for any errors or omissions and/or for any consequences arising from the use of the information in the self-assessment tool in any and all practice settings. Any reader of this document is cautioned that the ASHP Research and Education Foundation makes no representation, guarantee or warranty, express or implied, as to the accuracy and appropriateness of the information contained in this self-assessment tool and will bear no responsibility or liability for the results or consequences of its use.

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How to Use this Tool

Step 1. Minimum Requirements for a Vendor

When outsourcing the production of sterile products the first step in vendor evaluation is to see if they meet the minimum requirements. We have developed a group of questions that can be used to qualify a vendor. There is not a score for this section. A vendor simply meets the minimum requirements or they are disqualified. Once a vendor has been qualified we suggest further assessment of the vendor to determine which vendor is the best fit for your hospital or health-system.

Step 2. Vendor Assessment

The questions in this section are designed to help you objectively compare the services offered by potential outsourcing vendors. After answering each question, the Assesment Tool provides a score for the vendor and a table to interpret the score.

Step 3. Vendor Comparison

The vendor scores and score legend provided in the Assessment Summary can be used to compare potential outsourcing vendors.

Step 1: Minimum Requirement Questions

Part 1: Regulatory Compliance

| 1. | Does the outsourcer have a state pharmacy license available where the compounding center resides? | | | | |
|----|--|--------------------------|---|--|--|
| | Yes | No | | | |
| 2. | Is the outsourcer licen | sed to ship to my state? | | | |
| | Yes | No | N/A | | |
| 3. | | | of non patient-specific preparation ed as a drug manufacturer with t | | |
| | Yes | No | N/A | | |
| 4. | If the outsourcer prepares non patient-specific controlled substance preparations, is the outsourcer registered as a drug manufacturer with the DEA? | | | | |
| | Yes | No | | | |
| 5. | Are all pharmacists working for the outsourcer licensed in the state in which they are practicing? | | | | |
| | Yes | No | | | |
| 6. | If required, are all of the outsourcer's pharmacy technicians licensed or registered in the state where they are practicing? | | | | |
| | Yes | No | N/A | | |
| 7. | Does the outsourcer meet or exceed state required pharmacist-to-pharmacy technician ratios for the state in which the compounding center is located? | | | | |
| | Yes | No | N/A | | |
| 8. | | | ailable (not on backorder), does to n-sterile powders or other compo | | |
| | Yes | No | | | |
| | | | | | |

| 9. | When no commercial source exists to prepare admixtures, does the outsourcer use USP grade bulk ingredients obtained from a cGMP compliant supplier? If yes, can the outsourcer provide a certificate of analysis and potency testing of all bulk ingredients used? | | | | |
|--|--|------------------|------------------|----------------------------|------------------------|
| | Yes | No | | N/A | |
| 10. | Does the outsourcer hav by my institution? | e the required n | ninimum amount | of product liability insu | rance as outlined |
| | Yes | No | | | |
| 11. | Will my institution be covwith the outsourcer? | ered by this ins | urance in the ev | ent that there is no writt | en contract |
| | Yes | No | | | |
| Part | 2: Quality and Patier | nt Safety Mea | sures | | |
| 12. Can the outsourcer provide documentation that confirms staff competency (garbing as aseptic technique and related practices, and cleaning and disinfection procedures) is compounding of actual drug preparations? | | | | | |
| | Yes | No | | | |
| 13. | Can the outsourcer provi by preparing media fill ur | | | | ts aseptic techniques |
| | Yes | No | | | |
| 14. | Can the outsourcer provi are pre-qualified using m | | | | • |
| | Yes | No | | | |
| 15. | How often are outsourcing | g staff required | to undergo re-q | ualification using media | fills? |
| | More than once p | er year | Annually | Less than annua | lly or never |
| 16. | If a positive media fill occoroot cause? | curs, does the o | utsourcer perfor | m a comprehensive inv | estigation to identify |
| | Yes | No | | | |

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| 17. If a positive media fill occurs, does the outsourcer institute corrective and preventive action? | | | | |
|--|---|----------------------|---|--|
| | Yes | No | | |
| 18. | | | h substantial evidence that supports extended expiration when BUD limits in USP <797> are exceeded? | |
| | Yes | No | | |
| 19. | • | esting procedures, f | ermine extended expiration dates, using evidence-based or compounded sterile preparations for which no extended | |
| | Yes | No | | |
| 20. | Does the outsourcer ve processes that are cons | | ers are complying with gowning, gloving, and glove-tip apter <797> standards? | |
| | Yes | No | | |
| 21. | Does the outsourcer pe minimize contamination | | e microbiological and fungal environmental monitoring to | |
| | Performs More that | an Weekly | Performs Weekly | |
| | Does Not Perform | Weekly | | |
| 22. | • | • | re investigations of out-of-limit findings, as recommended ause, followed by corrective and preventative actions? | |
| | Exceeds USP <79 (Performs more th | | Meets USP <797> Guidelines (Performs weekly) | |
| | Does not meet US 797 Guidelines | Р | | |
| 23. | How frequently does the outsourcer perform nonviable and viable particle testing in primary engineering controls (e.g., laminar flow workbench, biological safety cabinet) and room air according to USP chapter <797> standards? | | | |
| | Exceeds USP <79 (Performs more th | | Meets USP <797> Guidelines (Performs weekly) | |
| | Does not meet US | Р | | |

797 Guidelines

| 24. | Does the outsourcer have a policy that requires validation of new or changed facilities, equipment, processes, container types, for sterility, and repeatability? | | | | |
|------|---|--|--|--|--|
| | Yes | No | | | |
| Part | 3: Medication Administrati | ion Safety Features | | | |
| 25. | Does the outsourcer provide reappreservatives in the preparation | adily accessible information regarding status of latex, DEHP and s they prepare? | | | |
| | Yes | No | | | |
| Part | 4: Service Excellence | | | | |
| 26. | Does the outsourcer compound specific cassettes) to meet the r | products in the containers types (e.g., syringes, minibags, pumpneeds of my institution? | | | |
| | Yes | No | | | |
| 27. | Does the outsourcer have business continuity plans in place in the event of a natural or man-made disaster or public health emergency? | | | | |
| | Yes | No | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Minimum Requireme | nt Assessment Results | | | |
| | minimani rioquii omone Accessiment rioculte | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Step 2. Vendor Assessment

The following questions are designed to help you objectively compare the services offered by potential outsourcing vendors. After answering each question, the Assessment tool provides a score for the vendor and a table to interpret the score.

PART I: REGULATORY COMPLIANCE (20% of Total Score)

| Sect | ion One: Current Registra | tion and Licensure | | | |
|------|--|---------------------------|--|--|--|
| 1. | What percentage of the outsourcer's pharmacy technician staff are certified by an authoritative boar (e.g., Pharmacy Technician Certification Board)? | | | | |
| | < 50 % | 50-94% | ≥95% | | |
| 2. | | | ocuments that they do not purchase or through secondary wholesalers? | | |
| | Yes, all available | | o Pedigree n available | | |
| 3. | If a commercial product component of a preparation is on backorder, can the outsourcer provide a certificate of analysis, potency testing, and proof that all other requirements are met (e.g., higher leve clean room) for High Risk Level Compounding per USP <797>? | | | | |
| | Yes | No | N/A | | |
| 4. | Does the outsourcer meet ASHP | guidelines for handling | of hazardous agents? | | |
| | Yes | No | N/A | | |
| 5. | Does the outsourcer meet NIOS | H guidelines for handlino | g of hazardous agents? | | |
| | Yes | No | N/A | | |
| 6. | Does the outsourcer meet USP | chapter <797> guideline | es for handling of hazardous agents? | | |
| | Yes | No | N/A | | |
| | | | | | |

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Section Two: Availability of Reports and Technical Summaries

7. Has the outsourcer disclosed any disciplinary or punitive action by any regulatory agency.(e.g., FDA warning letter, state board of pharmacy) within the past 36 months?

Yes, still Yes, resolved No unresolved

8. Does the outsourcer provide quality control history and quality assurance trend reports on a regular basis and upon request?

All available Some or none available



PART 2: QUALITY AND PATIENT SAFETY MEASURES (50% of Total Score)

Section One: Personnel Competency Through Media Fills

| 9. | Can the outsourcer provide documentation that confirms that sterile media used are certified by the |
|----|---|
| | manufacturer to be sterile and guaranteed to promote growth? |

Yes No

10. Can the outsourcer provide detailed reports on the incidence of positive media test results and the follow-up retests after corrective action is completed? During ongoing media monitoring, how many times in the last year were positive media fills reported on regualifications?

Never Once More than once

CONTRACTOR ASSESSMENT TOOL

Section Two: Availability of Reports and Technical Summaries

| 11. | In assigning expiration and beyond-use dating, does the outsourcer follow evidence-based and validated stability testing procedures to evaluate each preparation's (drug, diluent and device/container) potency at room temperature or refrigerated temperature as applicable? | | | | |
|------|---|---|--|--|--|
| | Follows procedures | Does not follow procedures | | | |
| 12. | nd-use dating, does the outsourcer follow evidence-based and validated uate each preparation (drug, diluent and device/container), based ures per USP chapter <797> guidelines, to ensure stability and paration (e.g. evaporation, precipitation, degradation, concentration)? | | | | |
| | Follows procedures | Does not follow procedures | | | |
| 13. | validated stability testing procedure | d use dating, does the outsourcer follow evidence-based and es to evaluate each preparation (drug, diluent and device/container) for H, particulate matter, color, sterility (container closure integrity testing)? | | | |
| | Follows procedures | Does not follow procedures | | | |
| 14. | Does the outsourcer provide mini | mum guaranteed shelf life upon delivery? | | | |
| | Yes | No | | | |
| Sect | tion Three: Maintenance of | Sterility and Environmental Monitoring | | | |
| | Site Visit Question | | | | |

| 15. | Does the outsourcer document that cleaning methods and agents are effective in preventing |
|-----|---|
| | contamination of the sterile preparations area? |
| | |

Yes No

Site Visit Question

| 10. | Are sporicidal agents | used to samilize | viais and ports i | to prevent spore | growing |
|-----|-----------------------|------------------|-------------------|------------------|---------|
| | | | | | |

Yes No

17. Does the outsourcer have action and alert limits for environmental monitoring?

Yes No

| 18. | For systems that require validation, does the outsourcer initiate corrective and preventive actions based on a formal review process? | | | |
|-----|---|---|---|--|
| | Yes | No | | |
| 19. | | ave a change control proce nt or software upgrades are | ess for times when preventive maintenance is e installed? | |
| | Yes | No | | |
| 20. | | - | and procedures (including shipping validation studies) to neir integrity and stability through the shipping cycle? | |
| | Yes | No | | |
| | | | | |
| | | | | |
| | PART 2 SCORE | ASSESSMEN PROGRESS | Part 1 Part 2 Part 3 Part 4 | |
| | | | , | |
| | RT 3: MEDICATION 6 of Total Score) | N ADMINISTRATION | SAFETY FEATURES | |
| Sec | tion One: Quality I | .abel | | |
| 21. | | se drug name differentiatio sound-alike and look-alike (| on in the form of TALL MAN lettering as defined by an drugs? | |
| | Yes | No | | |
| 22. | Does the outsourcer u within a therapeutic cl | | to differentiate drug names and drug concentrations | |
| | Yes | No | | |
| 23. | Does the outsourcer's administration of the o | | amount and concentration (e.g., mg/mL) to ensure | |
| | Yes | No | | |

| | | | |
|------|--------|------------|------|
| CONT | RACTOR | ASSESSMENT | TOOL |

| 0.4 | D | | | |
|--|--|--|--|----------|
| 24. | Does the outsourcer pro | vide auxiliary cautionary i | abeling to indicate contraindicated routes of adminis | tration? |
| | Yes | No | | |
| 25. | Does the outsourcer u anesthesia syringe pre | | ciety for Testing and Materials) color coding for | |
| | Yes | No | N/A | |
| 26. | | ave the capability to pro nin a therapeutic class a | vide additional risk cues on anesthesia syringes nd/or concentration? | to |
| | Yes | No | N/A | |
| 27. | hours per day, 7 days | oer week? | ion on latex, DEHP and preservative free product | s 24 |
| | Yes | No | | |
| 28. | Does the outsourcer p | rovides machine-readab | le bar codes on all of its labels? | |
| | Yes | No | | |
| 29. | | rovide comprehensive b number, and expiration (| ar coding that includes the national drug code (w | hen |
| | Yes | No | | |
| 30. | | | bar code placement that allow visualization of ditution's automated infusion pumps or syringe pu | |
| | Yes | No | N/A | |
| Sec | tion Two: Tamper | Evidence | | |
| 31. Does the outsourcer offer tamper-evident options which may include overwrap, shrink tamper-evident foil, and/or tamper-evident caps? | | | | |
| | Yes | No | | |
| | | | | |
| | | | | |
| | PART 3 SCORE | ASSESSA PROGRE | Dart 1 Dart 2 Dart 2 Dart 4 | |

PART 4: SERVICE EXCELLENCE (10% of Total Score)

Section One: Product Availability and Breadth of Line

| 32. Can the outsourcer provide concrete examples of their ability to provide new services to evolving patient care needs of my institution? | | | | s to meet the |
|---|---------------------|-------------------------|---------------------------------|---------------|
| | Yes | No | N/A | |
| 33. | Does the outsourcer | compound medications | for epidural administration? | |
| | Yes | No | N/A | |
| 34. | Does the outsourcer | compound medications | for intrathecal administration? | |
| | Yes | No | N/A | |
| 35. | Does the outsourcer | compound controlled su | bstances? | |
| | Yes | No | N/A | |
| 36. | Does the outsourcer | compound patient contr | olled analgesia solutions? | |
| | Yes | No | N/A | |
| 37. | Does the outsourcer | compound anesthesia s | yringes? | |
| | Yes | No | N/A | |
| 38. | Does the outsourcer | compound solutions for | continuous nerve blocks? | |
| | Yes | No | N/A | |
| 39. | Does the outsourcer | compound antibiotics? | | |
| | Yes | No | N/A | |
| 40. | Does the outsourcer | compound electrolyte so | plutions? | |
| | Yes | No | N/A | |
| | | | | |

| 41. | Does the outsourcer compound total parenteral nutrition? | | | |
|------|---|-------------------------------|------------------------------------|--|
| | Yes | No | N/A | |
| 42. | Does the outsourcer compound | l cardioplegia solutions? | | |
| | Yes | No | N/A | |
| 43. | Does the outsourcer compound | I solutions for use in the cr | itical care setting? | |
| | Yes | No | N/A | |
| 44. | Does the outsourcer compound | I CRRT (Continuous Rena | Replacement Therapy) preparations? | |
| | Yes | No | N/A | |
| 45. | Does the outsourcer compound | l oxytocin solutions? | | |
| | Yes | No | N/A | |
| 46. | Does the outsourcer compound | chemotherapy? | | |
| | Yes | No | N/A | |
| 47. | Does the outsourcer fill elaston | neric containers/pumps? | | |
| | Yes | No | N/A | |
| 48. | . Does the outsourcer compound medications for use in pediatric patients? | | | |
| | Yes | No | N/A | |
| Soot | ion Two. Face of Ordering | | | |
| | on Two: Ease of Ordering | | wob boood ordering? | |
| 49. | Does the outsourcer provide ea | | e web-based ordering? | |
| | Yes | No | | |

| 50. | Does the outsourcer offer E-22 | 2 "CSOS" ordering for co | ontrolled substance purchases? | | |
|-----|---|----------------------------|---|--|--|
| | Yes | No | N/A | | |
| 51. | Does the outsourcer offer a real- | time, online reporting too | l (e.g., shipment tracking, order history, invoices)? | | |
| | Yes | No | | | |
| Sec | tion Three: Order Turna | round Time | | | |
| 52. | Does the outsourcer provide gu compounded sterile preparation | | at meet your organization's needs for | | |
| | Yes | No | | | |
| 53. | Does the outsourcer provide sa | me-day delivery? | | | |
| | Yes | No | | | |
| 54. | Does the outsourcer provide ne | ext-day delivery? | | | |
| | Yes | No | | | |
| Sec | tion Four: Storage and | Space | | | |
| 55. | Site Visit Question Does the outsourcer's current production capacity meet the requirements of the organization? | | | | |
| | Yes | No | | | |
| 56. | Is the outsourcer willing to work solutions (e.g., customized pac | | n suggestions for improvement in storage | | |
| | Yes | No | | | |
| 57. | Has the outsourcer incorporate | d green programs (e.g., | waste reduction initiatives) into their services? | | |
| | Yes | No | | | |
| 58. | Site Visit Question If the outsourcer prepares comparea for these secure and is sta | | s using controlled substances, is the storage prior to entry into the area? | | |
| | Yes | No | | | |

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Section Six: Service Considerations

| 59. | Does the outsourcer negotiate prices with group purchasing organizations? | | | | |
|-----|---|----------------------|----------------------|------------------|-----------------------|
| | Yes | No | N/A | | |
| | | | | | |
| 60. | Does the outsourcer have a day, 7 days a week? | a mechanism to re | espond to customer | · service issues | or questions 24 hours |
| | Yes | No | | | |
| 61. | Does the outsourcer have t | he clinical experti | se in the area of pr | oducts provided | d (e.g., TPN)? |
| | Yes | No | | | |
| 62. | Does the outsourcer have sareas to the support the eff | | | | |
| | Yes | No | | | |
| 63. | Does the outsourcer have st areas who can ensure that a | | | | |
| | Yes | No | | | |
| 64. | Can the outsourcer provide practice changes that can i | | | | ding efficiencies and |
| | Yes | No | | | |
| 65. | Does the outsourcer have a customer testimonials? | a track record for i | innovation and prod | cess evolution a | s evidenced by |
| | Yes | No | | | |
| | | | | | |
| | PART 4 SCORE | ASSESS PROGR | Dart 1 | Part 2 Part | t 3 Part 4 |

Step 3: Assessment Summary

| Sterile Products Outsourcing Tool (SPOT) | | | | | | |
|---|---------------------|---------------------|---------------------|-------------------|------------------|--|
| Vendor Qualification* | Number of Questions | Total Raw Score | | | Total Points | |
| Part 1-4 | 27 | | | | | |
| Vendor Assessment | Number of Questions | Total Raw Points | Available Points | Section Weight | Section Score | |
| Part 1: Regulatory | 8 | | | 20% | | |
| Part 2: Quality and Patient Safety | 12 | | | 50% | | |
| Part 3: Medication Administration Safety Features | 11 | | | 20% | | |
| Part 4: Service Excellence | 34 | | | 10% | | |
| Total | 65 | | | 100% | | |

^{*} A zero in the Total Points section under Vendor Qualification indicates that the vendor is disqualified due to an unacceptable response to one or more minimum requirement questions.

