

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.

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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.		ares non patient-specific ananufacturer with the DE	controlled substance preparations A?	s, is the outsourcer	
	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.		neet or exceed state requipounding center is locate	ired pharmacist-to-pharmacy teced?	hnician ratios for the	
	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 provi aseptic technique and re compounding of actual d	lated practices,	and cleaning an		
	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			

17.	If a positive media fill o	occurs, does the outso	ourcer institute corrective and preventive action?
	Yes	No	
18.	-		n substantial evidence that supports extended expiration hen BUD limits in USP <797> are exceeded?
	Yes	No	
19.	-	esting procedures, fo	ermine extended expiration dates, using evidence-based or compounded sterile preparations for which no extended
	Yes	No	
20.			ers are complying with gowning, gloving, and glove-tip pter <797> standards?
	Yes	No	
21.	Does the outsourcer perminimize contamination		e microbiological and fungal environmental monitoring to
	Performs More th	nan Weekly	Performs Weekly
	Does Not Perform	n Weekly	
22.	-	-	e investigations of out-of-limit findings, as recommended ause, followed by corrective and preventative actions?
	Exceeds USP <7 (Performs more t		Meets USP <797> Guidelines (Performs weekly)
	Does not meet U 797 Guidelines	SP	
23.		g., laminar flow work	n nonviable and viable particle testing in primary kbench, biological safety cabinet) and room air?
	Exceeds USP <7 (Performs more t	97> Guidelines han semiannually)	Meets USP <797> Guidelines (Performs semiannually)
	Does not meet U	SP	

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 busin disaster or public health emerge	ess continuity plans in place in the event of a natural or man-made ency?				
	Yes	No				
	Minimum Requirement Assessment Results					

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)

ion One: Current Registra	tion and Licensure			
		n staff are certified by an authoritative board		
< 50 %	50-94%	≥95%		
Yes, all available	Some or no Information	•		
certificate of analysis, potency to	a commercial product component of a preparation is on backorder, can the outsourcer provide a ertificate of analysis, potency testing, and proof that all other requirements are met (e.g., higher level ean room) for High Risk Level Compounding?			
Yes	No	N/A		
Does the outsourcer meet ASHF	guidelines for handling c	of hazardous agents?		
Yes	No	N/A		
Does the outsourcer meet NIOS	H guidelines for handling	of hazardous agents?		
Yes	No	N/A		
Does the outsourcer meet USP	chapter <797> guidelines	s for handling of hazardous agents?		
Yes	No	N/A		
	What percentage of the outsourd (e.g., Pharmacy Technician Cert < 50 % Does the outsourcer provide per products outside of traditional draws, all available If a commercial product componicertificate of analysis, potency to clean room) for High Risk Level Yes Does the outsourcer meet ASHF Yes Does the outsourcer meet NIOS Yes Does the outsourcer meet USP	Does the outsourcer provide pedigree information that do products outside of traditional drug distribution networks of the composition of the product component of a preparation is on certificate of analysis, potency testing, and proof that all of clean room) for High Risk Level Compounding? Yes No Does the outsourcer meet ASHP guidelines for handling of the composition of the product composition is on certificate of analysis, potency testing, and proof that all of clean room) for High Risk Level Compounding? Yes No Does the outsourcer meet ASHP guidelines for handling of the composition of		

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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. In assigning expiration and beyond-use dating, does the outsourcer follow evidence-based and validated stability testing procedures to evaluate each preparation (drug, diluent and device/container), based on a range of extreme temperatures, to ensure stability and determine the impact on the preparation (e.g. evaporation, precipitation, degradation, concentration)?

Follows Does not follow procedures procedures

13. In assigning expiration and beyond use dating, does the outsourcer follow evidence-based and validated stability testing procedures to evaluate each preparation (drug, diluent and device/container) for chemical characteristics such as pH, particulate matter, color, sterility (container closure integrity testing)?

Follows Does not follow procedures procedures

14. Does the outsourcer provide minimum guaranteed shelf life upon delivery?

Yes No

Section 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

16. Are sporicidal agents used to sanitize vials and ports to prevent spore growth?

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 prevent based on a formal review process?			sourcer initiate corrective and preventive actions
	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	5					
24.	Does the outsourcer pro	ovide auxiliary cautionary l	iliary cautionary labeling to indicate contraindicated routes of administration?			
	Yes	No				
25.	Does the outsourcer u anesthesia syringe pro		iety for Testing and Materials) color codir	ng for		
	Yes	No	N/A			
26.		ave the capability to provinin a therapeutic class ar	vide additional risk cues on anesthesia synd/or concentration?	ringes to		
	Yes	No	N/A			
27.	Does the outsourcer properties hours per day, 7 days		on on latex, DEHP and preservative free	products 24		
	Yes	No				
28.	Does the outsourcer p	rovides machine-readab	e bar codes on all of its labels?			
	Yes	No				
29.		rovide comprehensive bandle number, and expiration of	ar coding that includes the national drug of late?	code (when		
	Yes	No				
30.			bar code placement that allow visualizati tution's automated infusion pumps or syr			
	Yes	No	N/A			
Sec	tion Two: Tamper	Evidence				
31.	 Does the outsourcer offer tamper-evident options which may include overwrap, shrink wrap, tamper-evident foil, and/or tamper-evident caps? 					
	Yes	No				
-						
	PART 3 SCORE	ASSESSM PROGRES	Dart 1 Dart 7 Dart 2 Da	rt 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 evolving patient care needs of my institution?				meet the
	Yes	No	N/A	
33.	Does the outsourcer co	ompound medications	for epidural administration?	
	Yes	No	N/A	
34.	Does the outsourcer co	ompound medications	for intrathecal administration?	
	Yes	No	N/A	
35.	Does the outsourcer co	ompound controlled s	ubstances?	
	Yes	No	N/A	
36.	Does the outsourcer co	ompound patient cont	rolled analgesia solutions?	
	Yes	No	N/A	
37.	Does the outsourcer co	ompound anesthesia	syringes?	
	Yes	No	N/A	
38.	Does the outsourcer co	ompound solutions for	continuous nerve blocks?	
	Yes	No	N/A	
39.	Does the outsourcer co	ompound antibiotics?		
	Yes	No	N/A	
40.	Does the outsourcer co	ompound electrolyte s	solutions?	
	Yes	No	N/A	

41.	Does the outsourcer compoun	nd total parenteral nutrition	?
	Yes	No	N/A
42.	Does the outsourcer compoun	nd cardioplegia solutions?	
	Yes	No	N/A
43.	Does the outsourcer compoun	nd solutions for use in the o	critical care setting?
	Yes	No	N/A
44.	Does the outsourcer compoun	nd CRRT (Continuous Ren	al Replacement Therapy) preparations?
	Yes	No	N/A
45.	Does the outsourcer compoun	nd oxytocin solutions?	
	Yes	No	N/A
46.	Does the outsourcer compoun	d chemotherapy?	
	Yes	No	N/A
47.	Does the outsourcer fill elasto	omeric containers/pumps?	
	Yes	No	N/A
48.	Does the outsourcer compoun	nd medications for use in p	ediatric patients?
	Yes	No	N/A
Sect	ion Two: Ease of Orderir	ng	
49.	Does the outsourcer provide e	easy, convenient and reliabl	e web-based ordering?
	Yes	No	

50.	Does the outsourcer offer E-22	oes the outsourcer offer E-222 "CSOS" ordering for controlled 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	etion 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						
	Yes	No					
54. Does the outsourcer provide next-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 with the organization on suggestions for improvement in storage solutions (e.g., customized packaging)?						
	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 I prior to entry into the area?				
	Yes	No					

CONTRACTOR ASSESSMENT TOOL

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 (e	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.		he outsourcer provide consultation services regarding potential compounding efficiencies and ce changes that can result from analysis of compounding patterns?						
	Yes	No						
65. Does the outsourcer have a track record for innovation and process evolution as evide customer testimonials?								
	Yes	No						
	PART 4 SCORE	ASSESS PROGR	Dart 1	Part 2 Part 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.

