



Computer Software Assurance

Paradigm Shift

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GAMP 5

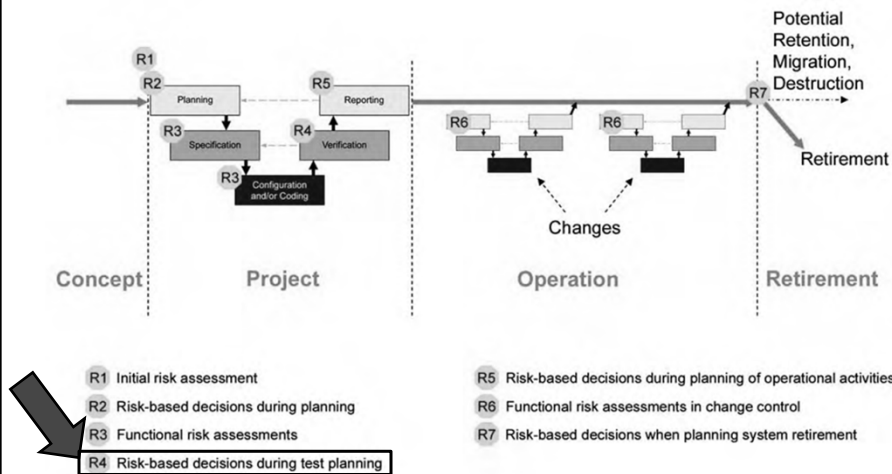
Guidance vs. Practice

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GAMP 5 Risk-Based Guidance

Figure M3.3: Typical Use of Risk-Based Decision Making



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GAMP 5 In Practice [Risk Management]

Figure M3.1: Quality Risk Management Process



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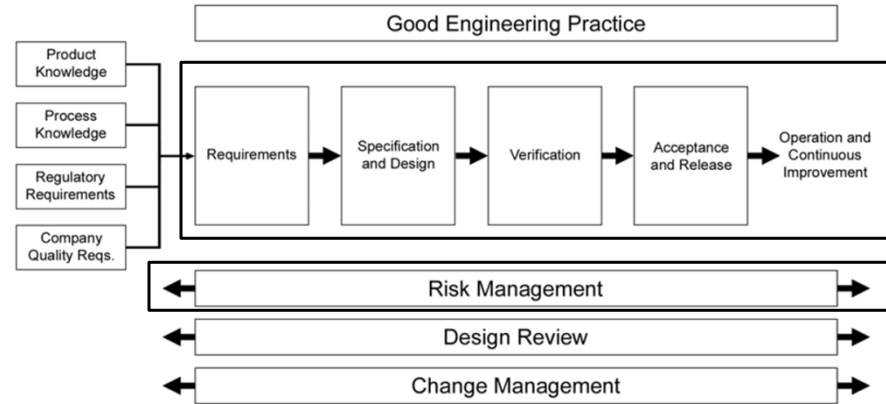
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In Practice [Risk Management] (*continued*)

Figure 3.1: The Specification, Design, and Verification Process



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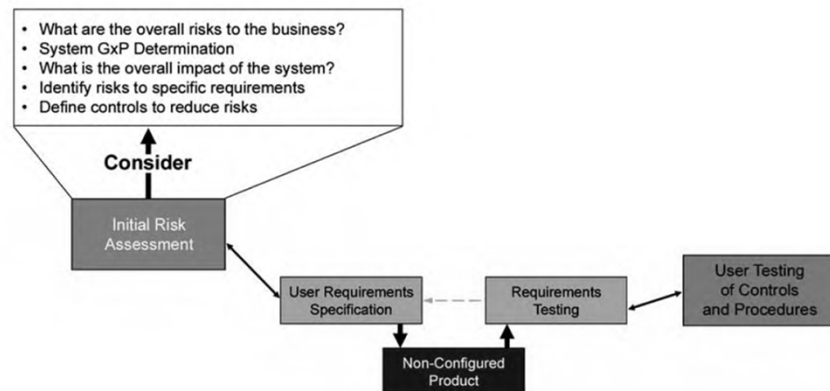
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In Practice [Non-Configured Product V-Model]

Figure M3.6: Risk-Based Approach for Non-Configured Product (Category 3)



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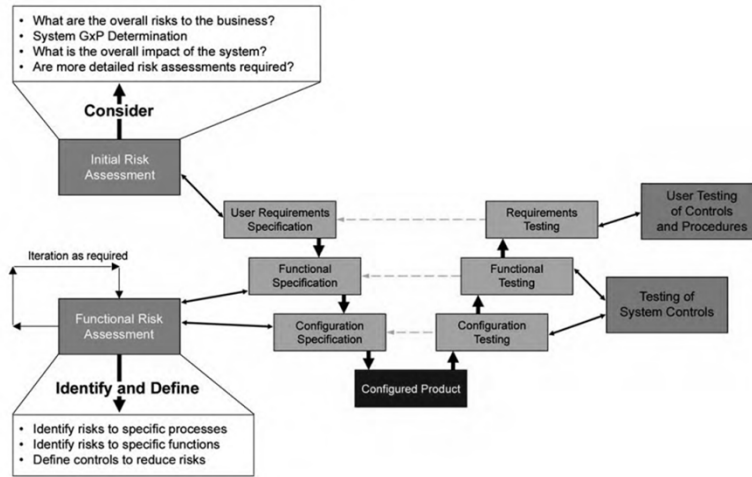
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In Practice [Configured Product V-Model]

Figure M3.7: Risk-Based Approach for Configured Product (Category 4)



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Anticipated FDA Draft Guidance

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FDA CDRH Case for Quality

“...the FDA is working with stakeholders—industry, health care providers, patients, payers, and investors—to build a strong Case for Quality.”

<https://www.fda.gov/medical-devices/quality-and-compliance-medical-devices/case-quality>

Computer Systems Validation identified as a major pain point and barrier for moving to better, more efficient technology.



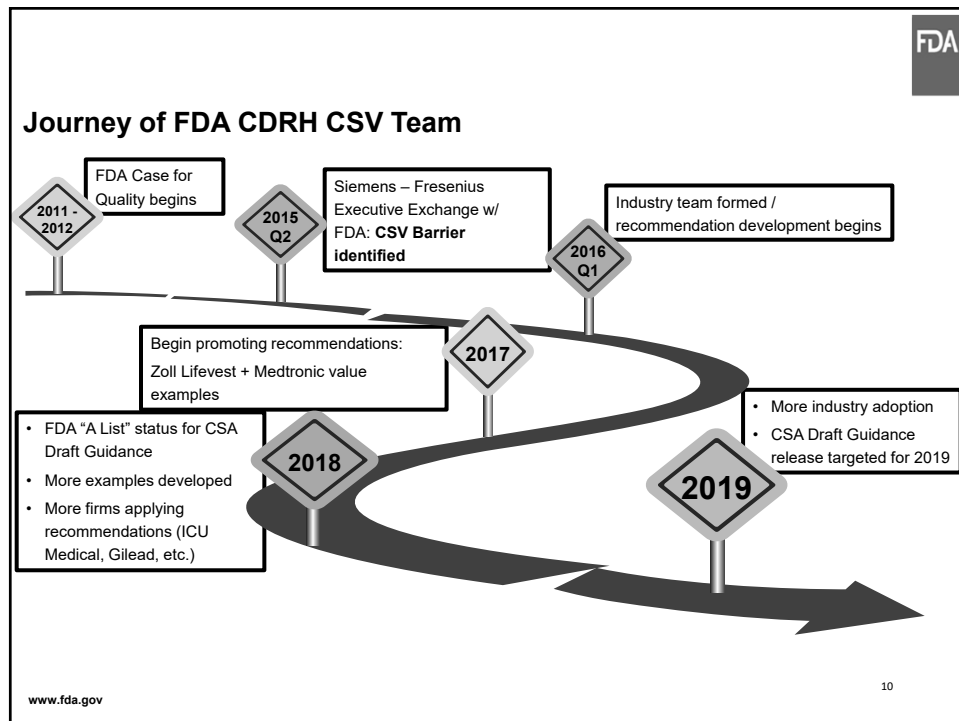
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The Industry CSV Team

Company	Name
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Boston Scientific	Damien McPhillips
Boston Scientific	Ray Murphy
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Company	Name
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Ortho-Clinical Diagnostics	Des Chesterfield
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Siemens PLM	Thorsten Ruehl
Zoll Lifevest	Frank Meledandri Sr.

Contributions also provided by past team members:
 Stacey Allen, Jason Aurich, Sean Benedik, Laura Clayton, Bill Hargrave, Joe Hens, Scott Moeller & Mark Willis

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Computer Software Assurance Considerations and Approach

The Quality System regulations allow for a manufacturer to apply a critical risk-based approach to their assurance activities. ***Establishing the intended use of the system, software, or feature is the foundation for determining the direct impact to device safety, device quality, or quality system integrity.*** Furthermore, FDA is interested in the situations when a failure to fulfill the intended use of the system, software, or feature, directly impacting device safety and device quality, results in direct patient safety risk.

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Key Take Aways

Why Now?

Med Dev lags other industries

- Lack of clarity
- Outdated compliance approach
- Perceived regulatory burden
- Reduces manufacturer's capability to learn, react, & improve

Activity	% Time Spent
Test	20%
Document	80%

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Key Take Aways

Why Now?

Create a Paradigm Shift...

- Streamline with value-driven, patient focused approaches
- Critical thinking & risk-based agile approaches
- Improve manufacturer's capabilities with automation

Activity	% Time Spent
Test	80%
Document	20%

Risk Based Assurance Strategies

- **Take credit for work already done**
 - Leverage existing activities and *trusted supplier data*
- **Use Agile test methods (e.g. unscripted testing) when appropriate**
- **Mitigate risk with downstream process controls**
- **Leverage continuous data and information for monitoring and assurance**

Defining Risk

- **Clearly define "intended use".**
- **Focus on the "direct impact on device safety and device quality", and does it result in "patient/user safety risk?" See examples.**
 - LMS vs Manufacturing Equipment Software
- **For PMA Products, CDRH is exploring using risk determination to make implementation of systems an annually reportable change no 30-Day Notice**

Assurance Evidence Capture

- **Use CSV tools to automate assurance activities**

Note: FDA does not intend to review validation of support tools.
- **Use electronic data capture & record creation vs paper documentation, screen shots, etc.**

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Supports Case for Quality

PHARMACEUTICAL
ENGINEERING

SECTIONS TOPICS WHITE PAPERS ISSUES ISPE

PHARMACEUTICAL ENGINEERING / NOVEMBER / DECEMBER 2019 / WHY ISPE GAMP® SUPPORTS THE FDA CDRH CASE FOR QUALITY PROGRAM

Features | November / December 2019

Why ISPE GAMP® Supports the
FDA CDRH: Case for Quality
Program

By Sion Wyn, Christopher J. Reid, Chris Clark, Michael L. Rutherford, Heather D. Watson,
Lorrie L. Vuolo-Schuessler, Arthur D. Perez, PhD

Products Products Products

Product and Process Understanding

Life-Cycle Approach within a QMS
Scaleable Life Cycle Activities
Science-Based Quality Risk Management

Leverage Supplier Involvement

The US FDA Center for Devices and Radiological Health (CDRH) Case for
Quality program promotes a risk-based, product quality-focused, and patient-
centric approach to computerized systems. This approach encourages critical
thinking based on product and process knowledge and quality risk
management over prescriptive documentation-driven approaches.

ISPE GAMP® global leadership strongly supports this risk- and quality-based approach to the assurance of
computerized systems and believes that current ISPE GAMP® guidance is already fully aligned and consistent
with such an approach, including new guidance coming this year from the CDRH.

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<https://ispe.org/pharmaceutical-engineering/why-ispe-gamp-supports-fda-cdrh-case-quality-program>

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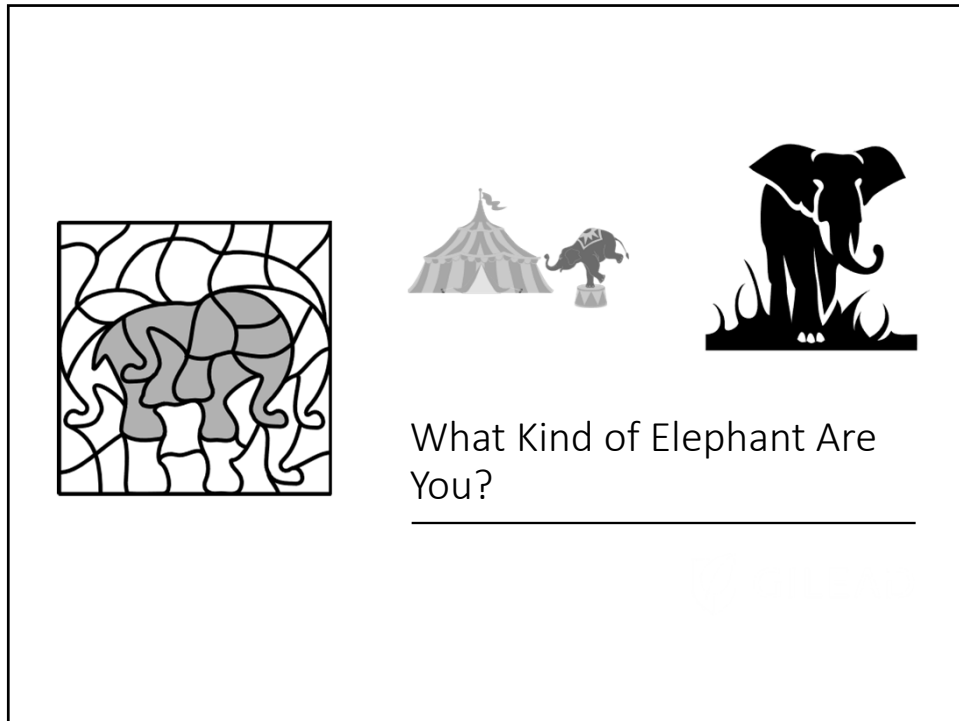
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In Real Life

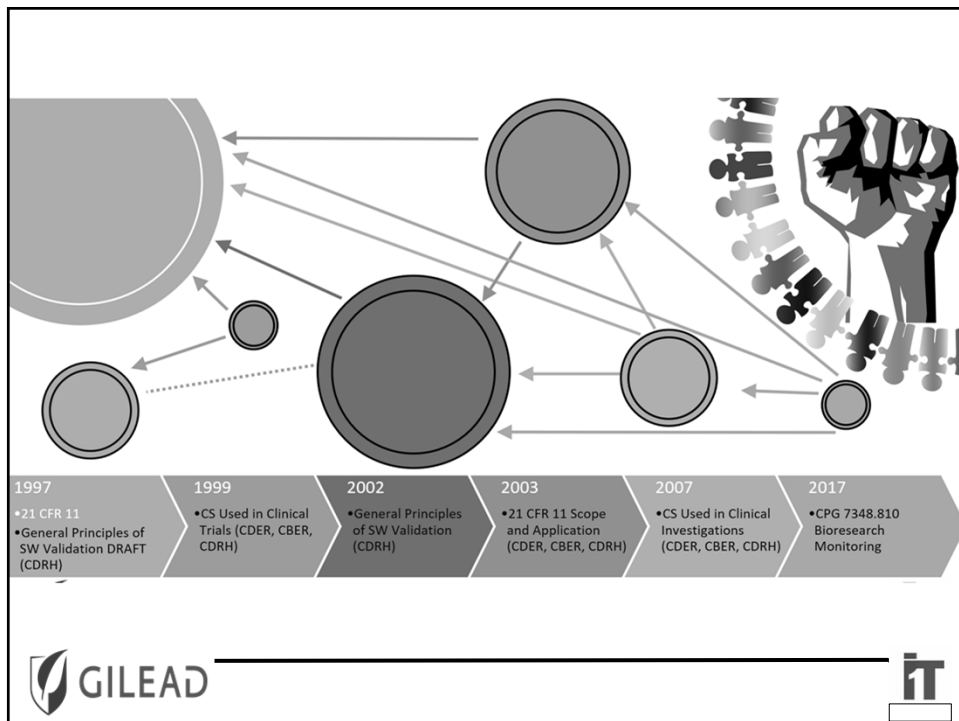
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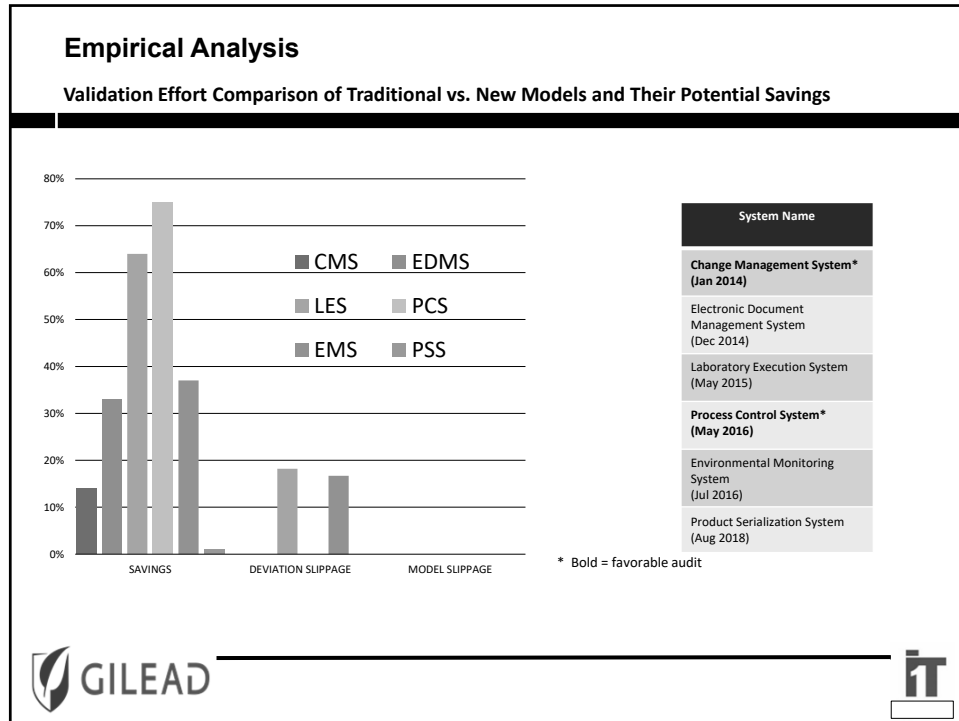
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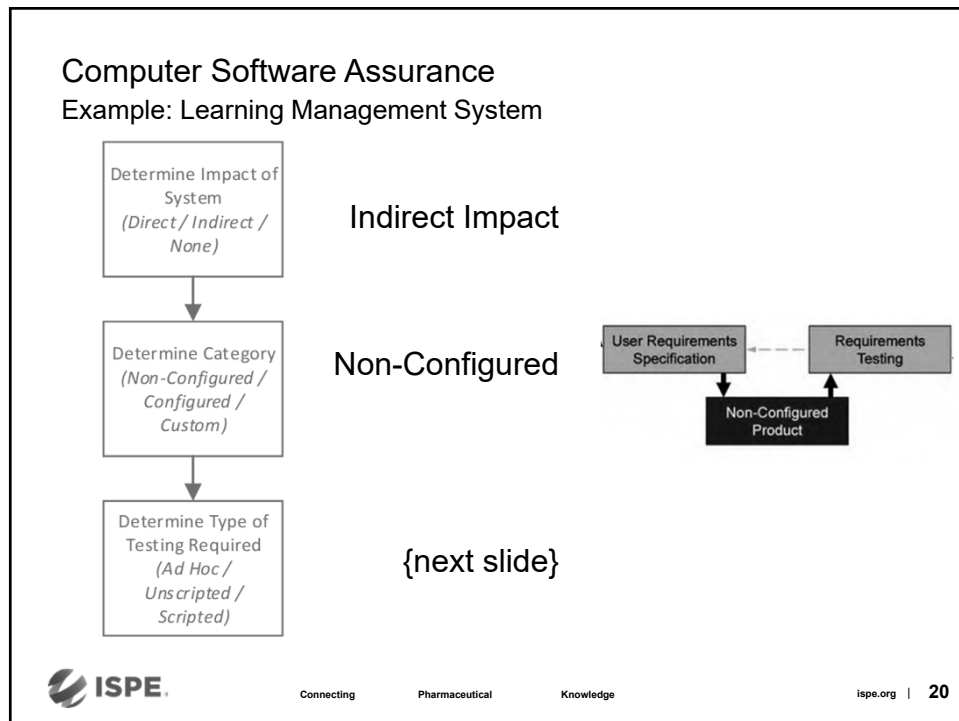
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Risk Based CSV Example: Learning Management System (LMS)

Streamlined Risk-Based
CSV

A medical device firm applies Risk Based Validation to an off the shelf LMS. Qualifying the vendor then applying risk to the feature level allows for much less documented verification activities.

Basic Assurance / Low Risk Features	Ex: Usability Features – training notifications, overdue training lists, curricula assignments.	Ad Hoc Testing 80%
Medium Risk Features	Ex: Capture evidence of training completion by entering username & password.	Unscripted Testing 20%
High Risk Features	No High Risk Features	Scripted Testing 0%

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Computer Software Assurance Example: NCR / CAPA System

Determine Impact of System
(Direct / Indirect / None)

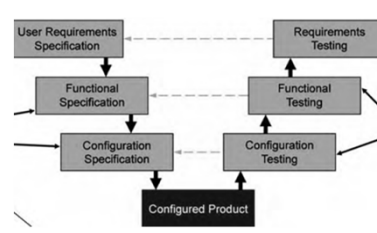
Determine Category
(Non-Configured / Configured / Custom)

Determine Type of Testing Required
(Ad Hoc / Unscripted / Scripted)

Direct Impact


Configured

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graph TD
    URS[User Requirements Specification] --> FS[Functional Specification]
    FS --> CS[Configuration Specification]
    CS --> CP[Configured Product]
    RT[Requirements Testing] --> FT[Functional Testing]
    FT --> CT[Configuration Testing]
    CT --> CP
    URS -.-> RT
    FS -.-> FT
    CS -.-> CT
      
```



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Risk Based CSV Example: Non-Conformance & CAPA Process

Streamlined Risk-Based
CSV

A medical device firm applies Risk Based Validation to an off the shelf CAPA System. Qualifying the vendor then applying risk to the feature level allows for much less documented verification activities.

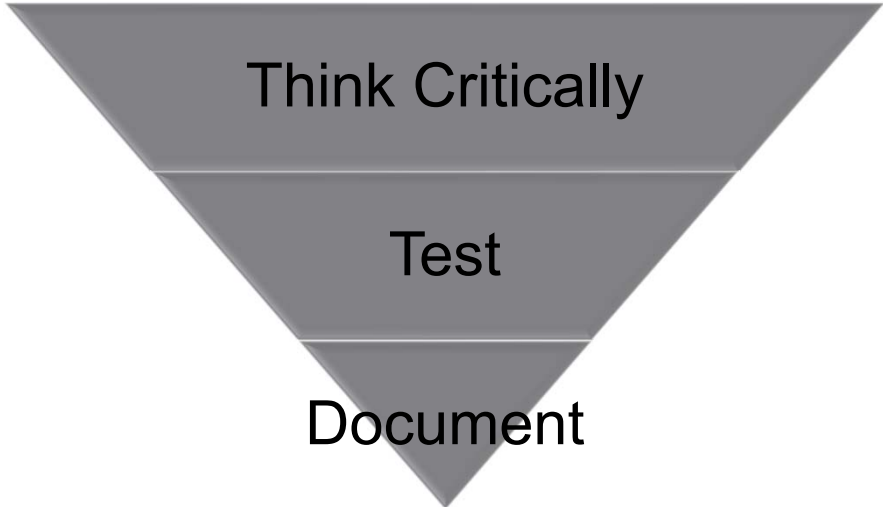
Basic Assurance / Low Risk Features	Ex: Usability Features – required data entry from optional data entry, attachments of objects, system workflow, non conformance initiation.	Ad Hoc Testing 30%
Medium Risk Features	Ex: Electronic Signature Features – audit trail, meaning of signature (review, approval).	Unscripted Testing 50%
High Risk Features	Ex: Product Containment – NC is initiated for product outside of the company's control, then the system prompts the user to identify if a product recall is then needed.	Scripted Testing 20%


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Time Spent

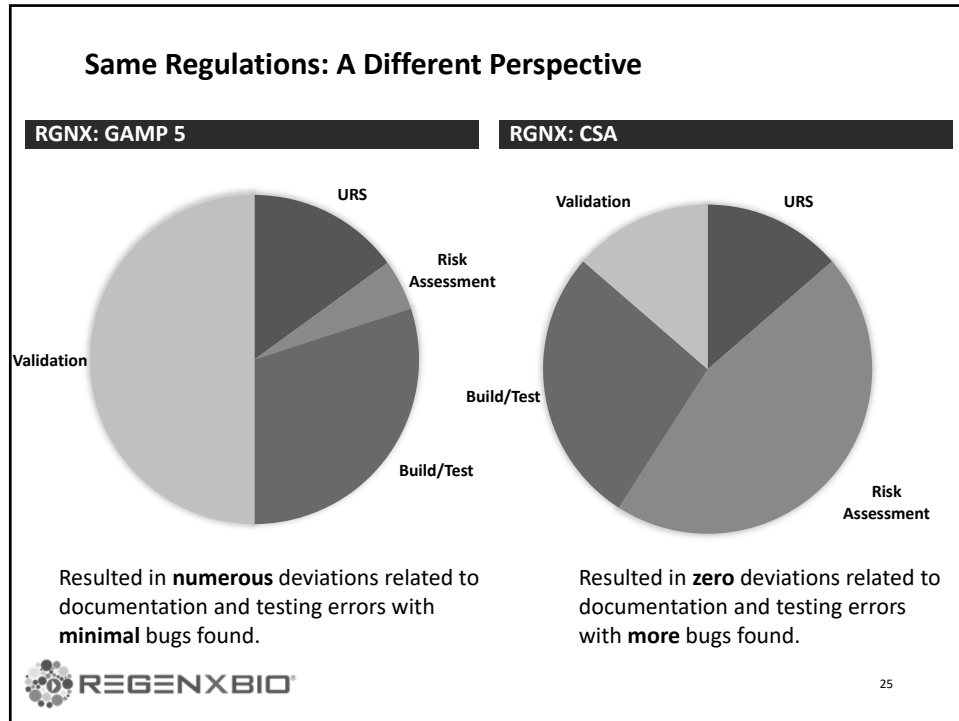




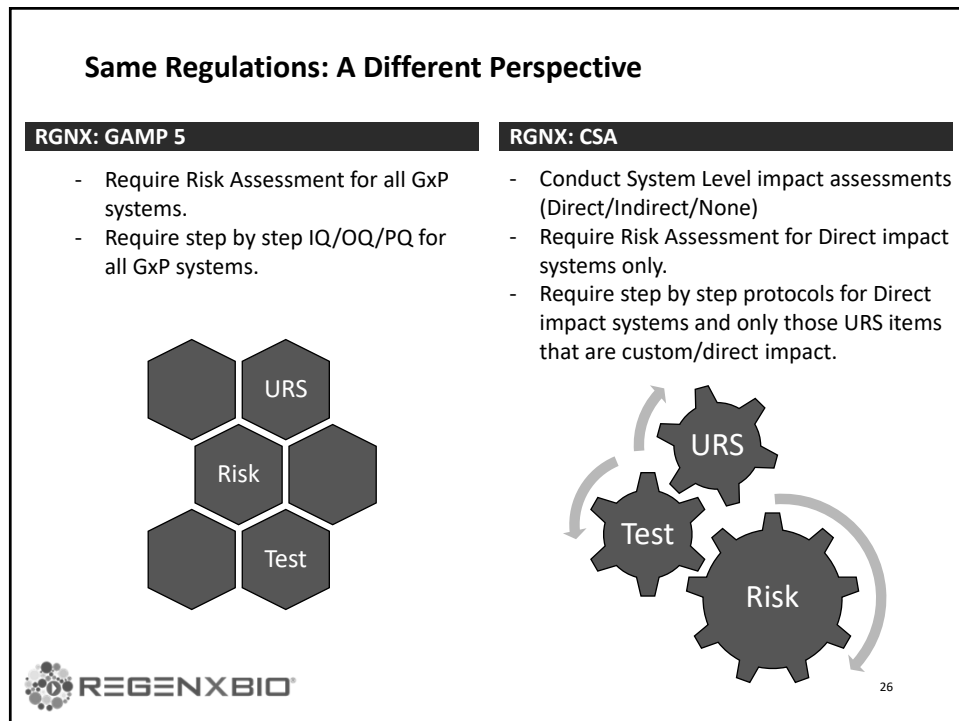
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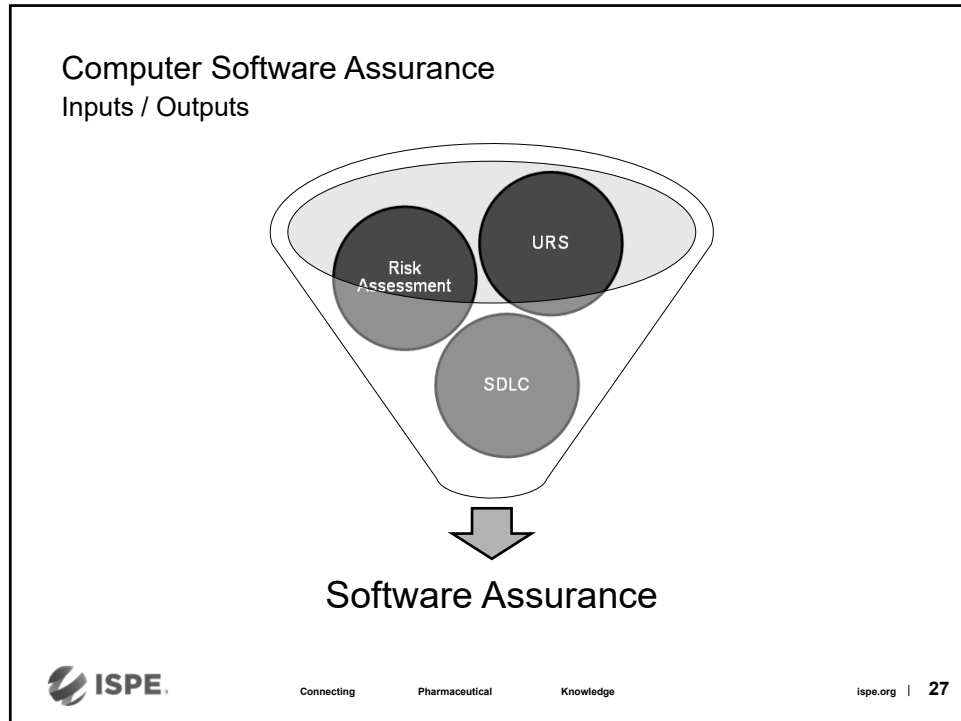
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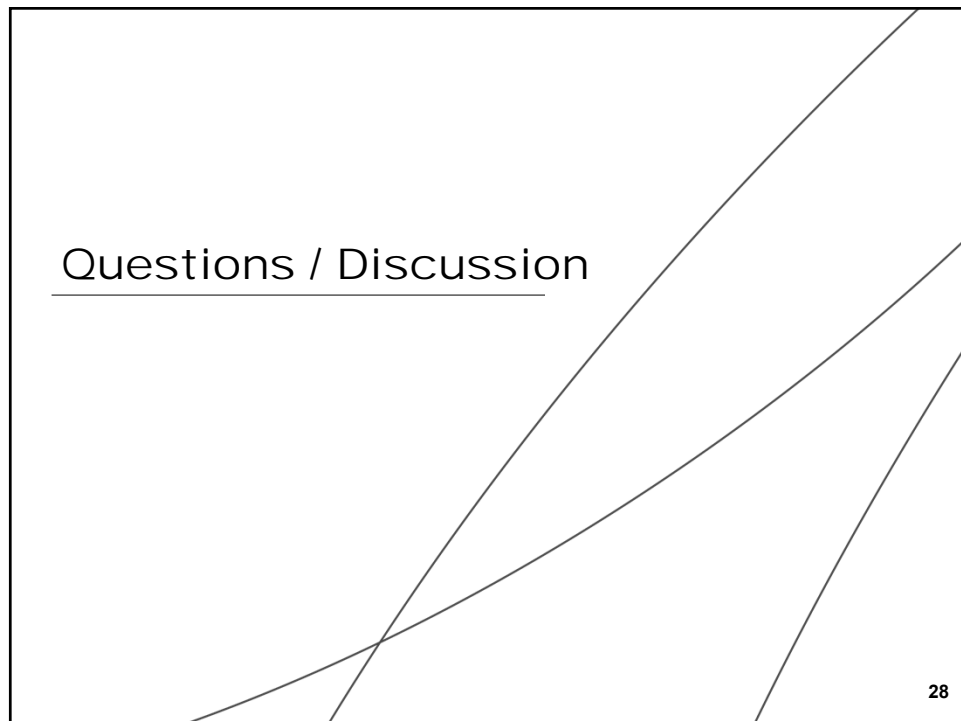
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Backup Slides



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