



**THE UNITED REPUBLIC OF TANZANIA**  
**MINISTRY OF HEALTH**



**TANZANIA MEDICINES AND MEDICAL DEVICES AUTHORITY**

**GUIDELINES FOR RELIANCE ON GOOD MANUFACTURING PRACTICES  
INSPECTION**

**SEPTEMBER 2025**

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## **Abbreviations**

AMA	-	African Medicine Agency
CAPA	-	Corrective Actions and Preventive Actions
COVID-19	-	Coronavirus Disease of 2019
CSC	-	Client Service Charter
EAC	-	East African Community
EU	-	European Union
FPP	-	Finished Pharmaceutical Products
GLP	-	Good Laboratory Practices
GMP	-	Good Manufacturing Practices
ICH	-	International Conference on Harmonization
LTR	-	Local Technical Representative
MCAZ	-	Medicines Control Authority of Zimbabwe
NCA	-	National Competent Authority
NRA	-	National Regulatory Authority
PQR	-	Product Quality Review
SADC	-	Southern African Development Community
SMF	-	Site Master File
TMDA	-	Tanzania Medicines and Medical Devices
WHO	-	World Health Organization
WHO-PQ	-	Prequalification
WLA	-	WHO Listed Authority

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**Dr. Yonah H. Mwalwisi**  
**Director for Human and Veterinary Medicines**

## Foreword

The Tanzania Medicines and Medical Devices Authority (TMDA) was established under the Tanzania Medicines and Medical Devices Act, Cap 219. The Authority operates as an Executive Agency as stipulated under Section 3 (1) of the Executive Agencies Act, Cap 245. The Authority is mandated to protect and promote public health by ensuring the quality, safety and effectiveness of medicines, medical devices, diagnostics and other health-related products.

Good Manufacturing Practices (GMP) inspections of manufacturing facilities seeking to market finished pharmaceutical products in Tanzania is among the functions of TMDA in fulfilling this mandate. GMP inspections are crucial components of the evaluation process for granting marketing authorization. Historically, TMDA has verified GMP compliance through on-site inspections; however, the process has experienced delays, often lasting up to 12 months from application receipt, primarily due to a high volume of applications.

Similarly, the COVID-19 pandemic underscored additional challenges, notably travel restrictions that hindered timely onsite inspections. Section 51(c) of the Tanzania Medicines and Medical Devices Act, Cap 219, mandates that medicines and medical devices must originate from facilities compliant with GMP requirements for registration. These challenges have resulted in delayed service delivery, increased customer complaints, and limited access to essential medicines.

To address these issues, TMDA has developed guidelines to facilitate the timely verification of GMP compliance through a desk assessment of submitted documentation. This approach aligns with WHO-recommended practices and aims to: -

- a. Reduce duplication of GMP inspections conducted under WHO Prequalification, WHO Listed Authorities, and Regional Harmonization Initiatives recognized by TMDA;
- b. Improve process efficiency by decreasing reliance on frequent onsite inspections; and
- c. Ensure ongoing adherence to GMP requirements by permitting onsite inspections if documentary evidence indicates non-compliance.

These guidelines aim to optimize resource utilization, enhance efficiency, and maintain TMDA's capacity to ensure that only quality, safe, and efficacious medicinal products are registered. The documentation requirements, assessment criteria, and submission procedures outlined in this document will promote transparency and consistency in the application process.

Furthermore, implementing this desk assessment approach will support business continuity, particularly during emergencies, by minimizing delays and safeguarding the medical supply chain. Applicants are encouraged to submit comprehensive and accurate documentation as outlined to streamline the review process and facilitate prompt marketing authorization decisions.

**Dr. Adam M. Fimbo**  
**Director General**

## **Definition of Terms**

The definitions given below apply to the terms used in this guide. They may have different meanings in other contexts.

### **Act:**

Means the Tanzania Medicines and Medical Devices Act, Cap 219;

### **Authority:**

Means the Tanzania Medicines and Medical Devices Authority, or the acronym “TMDA”, established under section 4(1) of the Act;

### **Agent or Local Technical Representative:**

Means a person residing in the country authorized by the applicant or manufacturer to deal in medical products to be an agent (local technical representative);

### **Applicant:**

Means an applicant is a person who applies for marketing authorization of a medical product to TMDA, who must be the owner of the product;

### **Competent Regulatory Authority:**

Means any organization that has legal authority or power to perform a designated regulatory function for the authorization of a medical product;

### **Desk Assessment:**

Means an evaluation of prior documentary evidence by a competent regulatory authority recognized by the national regulatory authority for compliance with the required good practices (good manufacturing practices) in support of marketing authorization;

### **Emergency Situation or State**

Means unexpected factors, including pandemics that make it impossible for the Authority to conduct on-site inspections either in a particular country or all countries. Late planning for inspection, limited resources or war in a country where the facility is located shall not be considered an emergency.

### **Good Manufacturing Practice**

Means the quality assurance part, which ensures that products are consistently produced and controlled to the quality standards appropriate for the intended use and as required by the marketing authorization. GMP standards are primarily to diminishing the list of inherent risks in any pharmaceutical production that cannot be prevented completely through the testing of the final product;

### **Manufacture:**

Means all operations of purchase of materials and products, production, quality control, release, storage, distribution of medicinal products and the related controls;

**Manufacturer:**

Means a company that carries out operations such as production, packaging, repackaging, labelling and re-labelling of pharmaceuticals;

**Marketing Authorization:**

Means a legal document issued by the competent regulatory authority that establishes the detailed composition and formulation of the product and the pharmacopoeia or other recognized specifications of its ingredients and of the final product itself, and includes details of packaging, labelling and shelf life;

**Orphan Medicines**

Means a medicine designated as such under the terms and conditions set out under Regulation 9 of the Tanzania Medicines and Medical Devices (Orphan Medicines) regulations, 2018.

**Pharmaceutical Product:**

Means any material or product intended for human or veterinary use presented in its finished dosage form or as a starting material for use in such a dosage form that is subject to control by pharmaceutical legislation in the exporting state and/or the importing state;

**Regional Harmonization Initiative:**

Means programs aimed at complementing regulatory activities within the regions, i.e. EAC and SADC, for the purpose of making efficient use of resources. Under these arrangements, inspections are conducted jointly, and the outcomes are recognized by the member states.

**Reliance**

The act whereby the regulatory authority in one jurisdiction considers and gives significant weight to assessments performed by another regulatory authority or trusted institution, or to any other authoritative information, in reaching its own decision. The relying authority remains independent, responsible and accountable for the decisions taken, even when it relies on the decisions, assessments and information of others.

**Site Master File**

Means a document containing specific information about the activities undertaken in the pharmaceutical manufacturing site and is usually prepared by the manufacturer.



## **PART I: CONSIDERATION FOR DESK ASSESSMENT FOR GMP INSPECTION RELIANCE**

### **1.1 Introduction**

With the complexity of global supply chains, the demand for inspecting pharmaceutical manufacturing facilities far exceeds what any national competent authority can accomplish. Over the years, TMDA has experienced an increased number of applications, which has overwhelmed its capacity to conduct onsite Good Manufacturing Practice (GMP) inspections promptly.

An informed decision on the GMP compliance of a manufacturing facility can be made in certain circumstances, based on the outcome of work by another National Medicines Regulatory Authority (NMRA). Consequently, it is possible (outside the established framework of mutual recognition agreement, or equivalent and where legal requirements allow) for inspectorates to identify specific instances based on risk management principles where an onsite inspection of a manufacturing facility in an overseas territory is not required because an acceptable level of GMP compliance has been confirmed and assured by another authority or authorities.

Confirming GMP compliance through remote (desk assessment), where appropriate, without undertaking an on-site inspection, helps to speed up the processing of applications for marketing authorisation. In addition, it also helps to avoid duplication of work between regulatory authorities, reduces regulatory burden on manufacturing sites and enhances efficient use of resources.

The desk assessment process involves the submission of current, accurate, and authentic documentary evidence by the applicant/manufacturer to the authority to demonstrate the conformity of all processes involved in the manufacturing of pharmaceutical products. The evidence provided is assessed to determine the level of GMP compliance based on the accepted standards and the scope of application.

These guidelines focus on overseas manufacturers who intend to obtain marketing authorisation of human and veterinary medicines in Tanzania through submission of documentary evidence to assess GMP conformity without an on-site inspection. The guidelines are developed based on Section 6 of the Tanzania Medicines and Medical Devices (Good Manufacturing Practices Enforcement) Regulations, 2018.

The guidelines are divided into six (6) major sections. The sections delineate the principles and general requirements for desk assessment, the application procedure for desk assessment,

processing applications, documentary evidence requirements, triggers and factors leading to conducting onsite inspections, and the publication of GMP desk assessment reports on the TMDA website.

## **1.2 Criteria for desk assessment**

Pharmaceutical manufacturing facilities to be considered for desk assessment shall meet any or all of the following criteria: -

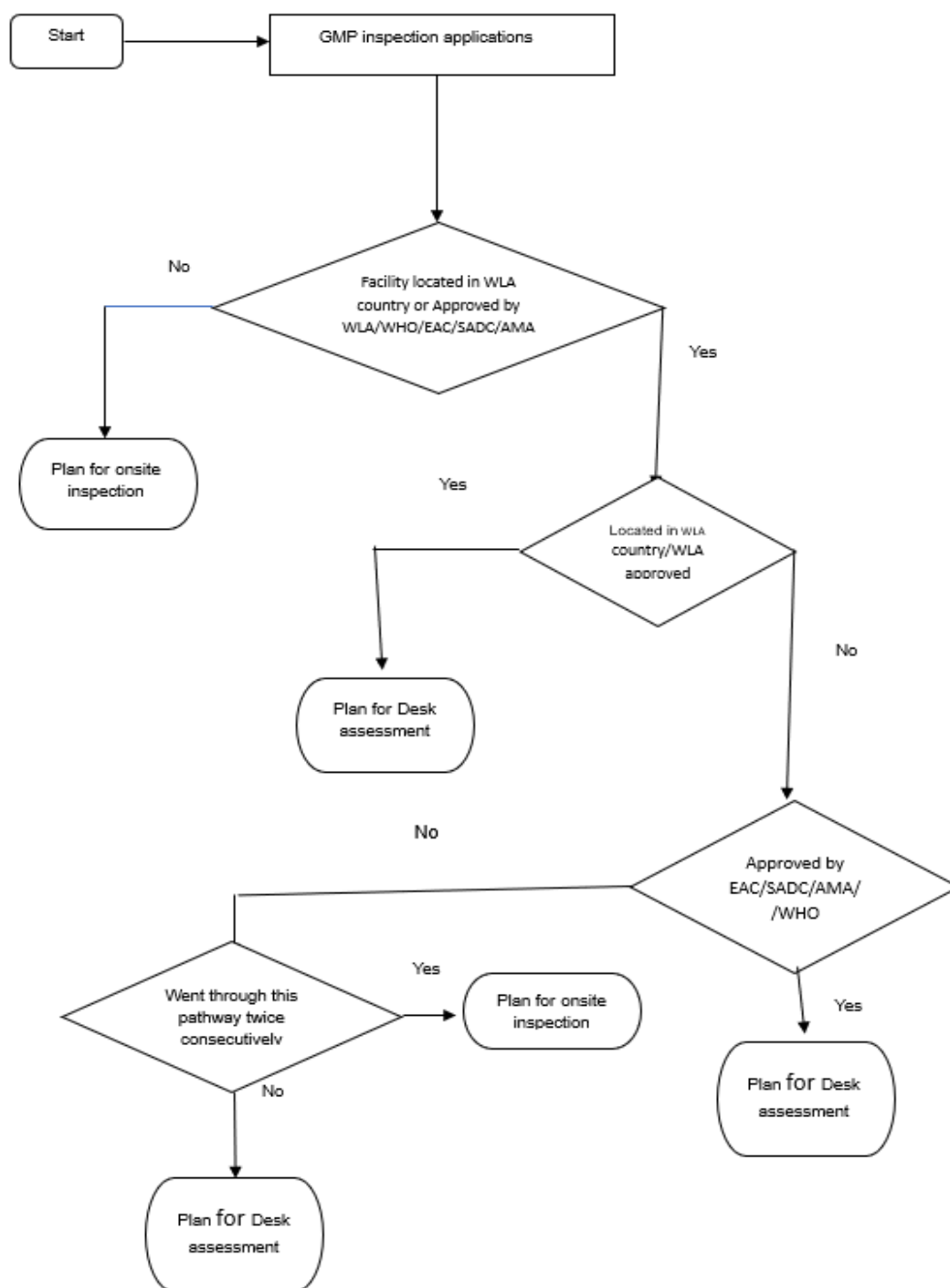
- a) Located in countries with WHO Listed Authorities (WLA) or inspected and approved by WLA (see [List of WLA](#)), and as may be updated by WHO from time to time.
- b) Inspected and approved by the World Health Organization (WHO) under the Medicines Prequalification Program.
- c) Jointly inspected and approved by Regional Harmonisation Initiatives, namely, East African Community (EAC), Southern African Development Community (SADC) and African Medicine Agency (AMA).

For facilities falling in category 1.2 (c) above, there will be no formal desk assessment, but rather the approval letter or GMP certificates and GMP reports issued under this arrangement shall be adopted by the Authority in issuing GMP certificates.

Where a facility that is deemed to be inspected or located in a country with a Stringent Regulatory Authority, which is not yet included in the WLA list, the Authority may decide to conduct a Desk Assessment for its GMP inspection applications.

### **1.3 Decision Tree for Desk Assessment**

TMDA has the final mandate to decide on whether to conduct a desk assessment or an on-site inspection. The following decision tree shall guide whether a facility qualifies for a desk assessment.



**Figure 1:** Decision tree for GMP Inspection through desk review

## 1.4 Application Procedures for Desk Assessment

### Principle

The desk assessment process involves submission of documentary evidence by the applicant, usually a manufacturer or Local Technical Representative (LTR), to the Authority to demonstrate the conformity of the manufacturing facility to GMP standards. The evidence provided is assessed to determine the level of compliance based on the accepted standard and the scope of the application. The outcome of the assessment process is used to make a regulatory decision that serves as a prerequisite in determining the marketing authorization of a medicinal product.

## General

- 1.4.1 Before the desk assessment process is initiated for a particular manufacturing site, an application for market authorization of finished pharmaceutical medicinal products must be lodged by an applicant to the Authority.
- 1.4.2 Application for GMP desk assessment shall be made to the Authority by submitting the following: -
  - a) A duly filled-in GMP desk assessment application form whose template is attached as Annexe I to these guidelines, submitted online or a soft copy in *PDF* format using an external storage device.
  - b) A non-refundable GMP inspection fee as prescribed in the fees Regulations in force. The Desk assessment fee is the same as the physical inspection fee.
  - c) Documentary evidence(s) and information as indicated in Annexe II to these guidelines; and
  - d) Updated electronic *PDF* version of the Site Master File (SMF) containing minimum information as provided in Annexe III to these guidelines.
- 1.4.3 The Authority may request any other additional documentation for clarification during assessment.
- 1.4.4 The applicant shall ensure that the documentary evidence(s) provided, upon which GMP approval is granted, are current, accurate and authentic. Any document submitted must adhere to the following general requirements: -
  - a) All certificates and other supporting documents should be in either English or in Swahili language.
  - b) Where the document is not in English or the Swahili language, it should be

submitted with a certified translation;

- c) Translated documents must be accompanied by a signed and dated statement by the certified translator, stating that it is a true and accurate translation of the original document;
- d) Documents must be the most recent, valid, with the effective version, reflect current activities and practices and dated; and
- e) Documents must provide sufficient information to cover the scope of activities for which GMP compliance is sought.

1.4.5 The Authority may request certified copies of original documents at any time. Certified copies must be legible and authenticated as true copies.

1.4.6 The information in an application shall be deemed confidential and not shared with any other party outside TMDA.

## **1.5 Processing applications for desk assessment**

### **Principle**

The principles of quality risk management shall be employed to perform a desk assessment considering the management of resources in terms of time, funding and personnel. The assessment process aims to ensure timely decision-making on approval of products that meet quality, safety and efficacy standards without putting the public at risk. Based on the fact that other competent and trusted NMRAs and organizations have inspected the manufacturing facility and, in some cases, multiple products manufactured at the site, the assessment shall take into consideration and focus on the critical products such as sterile or biological products and critical processes such as aseptic filling and terminal sterilization in the manufacture of a specified product in relation to public health risk.

### **General**

1.5.1 Once an application has been received and GMP inspection fees paid as prescribed in the fees regulations enforced, the Authority shall process the application as per the time frame set out in the current TMDA Client Service Charter (CSC).

1.5.2 In case of missing information or issues that require clarification by the applicant,

these shall be communicated to the applicant via a letter of query. If no responses or appropriate responses are received within 30 calendar days, an on-site inspection shall be scheduled.

- 1.5.3 In case of outright rejection of submitted documentary evidence, TMDA shall inform the applicant and plan for on-site inspection.
- 1.5.4 If the evidence provided demonstrates the GMP compliance of a facility, the Authority shall issue a desk assessment GMP certificate in a format whose template is attached as Annexe IV to these guidelines and update the application status in the database to 'compliant'.
- 1.5.5 The validity of the desk assessment GMP Certificate shall be three (3) years from the date of issuance.
- 1.5.6 The Authority shall suspend/revoke the issued desk assessment GMP certificate if satisfied that the facility is no longer considered to comply with GMP requirements, and TMDA shall plan for on-site inspection.

## **1.6 Documentary Evidence Requirements**

### **Principle**

Documents submitted by manufacturers establish the basis of determining GMP compliance of the manufacturing facilities; hence, they should contain information that is accurate and reflects the current status of the facility. Submission of inaccurate or false information may result in the declaration of the manufacturer as GMP non-compliant.

### **General**

- 1.6.1 Facilities shall be required to submit documents for desk assessment as mentioned in **Table 1** below: -

**Table 1: Types (s) of facility and evidence documents required for desk assessment**

<b>Type of facility</b>	<b>Where inspected by EAC or SADC, or AMA joint harmonisation initiatives</b>	<b>Where inspected by the WLA or the WHO Prequalification Scheme</b>
Non-sterile products facilities	Evidence List A and the current joint EAC or SADC, or AMA GMP inspection report.	Evidence List A and B
Sterile products, biological and immunological facilities	Evidence List A: current joint EAC or SADC, or AMA GMP inspection report or GMP Certificate issued by the WLA country.	Evidence Lists B, C and D
Outsourced (contract)testing laboratory, and outsourced sterilization	Evidence List A, current joint EAC, SADC, or AMA GMP inspection report and certification from relevant ISO Standards for the sterilization facility (if applicable to the manufacturing facility or contracted activity)	Evidence List D

1.6.2 A list of the documents that shall be used for desk assessment is provided in Annexe II and categorized as evidence lists A, B, C and D.

## **1.7 Triggers and factors leading to conducting an onsite inspection**

1.7.1 If it is known that the facility has not been inspected and approved by WLA, WHO-PQ or regional harmonisation initiatives (EAC, SADC or AMA).

1.7.2 The facility or production line was not in the scope of WLA or WHO- PQ approval.

1.7.3 Failure to submit documentary evidence or any requested information during the desk assessment.

1.7.4 Facilities that have been subjected to successful desk review for two consecutive times (For facilities not located in WLA countries).

1.7.5 Facilities have recurring reports of manufacturing substandard products.

1.7.6 Any other risk factors that may be identified by the Authority.



## **1.8 Publication of GMP Desk Assessment Reports**

Summarized desk assessment reports for facilities found to be GMP compliant shall be published on the TMDA website: [www.tmda.go.tz](http://www.tmda.go.tz)

## **PART II: CONSIDERATION FOR GMP INSPECTION DURING EMERGENCIES**

### **2.1 Introduction**

A decision on GMP compliance for manufacturing facilities during emergency states may be made through either reliance or virtual GMP inspection. During declared emergencies which restrict travel to manufacturing facilities for more than six (6) months, reliance on desk assessment could be the best option for establishing GMP compliance. However, not all facilities meet the criteria stipulated in section (2) of Part I of these guidelines.

The criteria stipulated in section (2) of Part I shall be waived for facilities manufacturing the following categories of products:

- a) Low-risk pharmaceutical dosage forms such as those administered orally or topically;
- b) Products of public health importance such as anti-retroviral (ARVs), vaccines, anti-tuberculosis (Anti-TBs), Anti-malaria, anti-cancer, some antibiotics, and orphan medicines;
- c) Products intended to be used for emergencies; and
- d) Products undergoing license renewal applications.

In addition, facilities that manufacture products that do not fall under a) to d) above shall be subjected to virtual Inspection.

### **2.2 Reliance on Institutions other than WLA, EAC, SADC, AMA and WHO**

- a) Desk assessment shall be based on an inspection conducted by local and other NMRAs to determine qualification for a one (1) year GMP inspection waiver.
- b) For the desk assessment to be conducted, the facilities shall have in advance submitted application dossiers and their information assessed and accepted.

### **2.3 Virtual GMP Inspection**

New applications for GMP Inspection for manufacturing facilities that manufacture high-risk medicines, such as parenteral formulations and paediatric oral solutions that have no registered therapeutic equivalent, shall qualify for virtual inspection during declared

emergencies. Other new applications for GMP inspection of high-risk product manufacturing facilities shall wait until the emergency state is over.

For the conduct of virtual inspection, the following shall be considered;

- a) Use of applicable procedures that already exist for planning, coordinating, preparing and conducting GMP inspections;
- b) Taking into account the limitations of time-zone differences between the manufacturing site and the inspectors, and the health and well-being of personnel involved in the inspection
- c) Criticality of the continuity or commencement of supply of the pharmaceutical product
- d) Security and integrity of the supply chain of the pharmaceutical product.

## **2.4 Application Procedures**

There shall be no applications made for virtual GMP inspection or reliance on institutions other than WLA, EAC, SADC, AMA and WHO during the state of emergency; instead, already submitted applications shall be used to make informed decisions.

## **2.5 Issuance of GMP certificates during emergencies**

- a) There will be no GMP certificates issued through reliance on GMP inspection during emergencies or virtual GMP inspection. Instead, one (1) one-year waiver for onsite GMP inspection shall be issued.
- b) Validity of GMP inspection waiver issued during emergencies
  - a) The validity of one (1) year shall be issued and may be extended. On-site GMP inspection shall be conducted immediately after the emergency is over, and subject to the inspection plan prepared by the Authority.
  - b) The Authority shall officially inform an applicant about the granted one (1) year waiver for GMP inspection.

## Revision History

Revision No:	Date	Author	Description of change	Section(s) Modified	Approvals
1	06/03/2025	DMC	Replacing EAC GMP Guidelines with TMDA GMP Guidelines	Part 1: Section 1.0	DG
			Includes a statement that excludes payment of GMP inspection fees for facilities inspected under the ZAZIBONA initiative	Part 1; Section 3.2.2	
			Removing definitions related to medical devices	Definition of Terms	
			Adding the wording “for facilities not located in WLA countries”	Part I; 6.4	
			Removing texts related to medical device quality	Cover page and Parts II and III	

			audit, as this is currently under a separate directorate.		
			Merging parts II and III to form Part II and including a requirement to rely on inspection reports of other NMRA's other than WLA, WHO, EAC, SADC or AMA joint inspections	Part II and III	

### 3. Annexes

#### Annexe I: GMP Desk Assessment Application Form

	<b>GMP DESK ASSESSMENT APPLICATION FORM</b>	<b>TMDA/DMC/MCIE/R/01 4 Rev #:02</b>
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**Please read this section carefully before completing the form**

1. Please check the corresponding box in the “Encl.” column if any document is enclosed and indicate the respective indexes in the submission folder
2. Please check the boxes as appropriate

#### A. PARTICULARS OF THE APPLICANT AND MANUFACTURING SITE

Note	Particulars of Applicant		
<b>A.1</b>	Applicant's name		
	Physical address of Head Office		
	Post Code:	Country:	
	Contact Person:	Telephone and mobile number:	
	Fax:	E-mail:	
	Website:		
Note	Particulars of the Manufacturing Site(s)		
<b>A.2</b>	Name		
	Unit		
	Block		

Physical address of the site	
Post Code:	Province/State:
Country:	Contact Person:
Telephone and Mobile Number:	Fax:
E-mail:	Website:

## B: AUTHORIZED REPRESENTATIVE/AGENT IN THE COUNTRY

Name of Local Technical Representative (LTR)	
Physical address:	
Post Code:	Country:
Contact Person:	Telephone and Mobile Number:
E-mail:	Fax:

## C: PRODUCTION LINES TO BE ASSESSED

DOSAGE FORM	Tick where applicable	*CATEGORY	**ACTIVITIES
Tablets			
Capsules			
Injections (SVP)			
Injections (LVP)			
Oral liquids			
Creams/Ointments/lotions			
Others (specify)			

\*Category means any of the following:

Beta lactam, non-beta lactam, Biologicals, Vaccines, Hormones, Cytotoxic products.

\*\*Activity means any of the following:

- Formulation (dispensing, mixing, blending)
- Processing (compression, emulsification, etc.)

- Packing
- Quality Control
- Warehousing (raw material, finished products)

## D: DOCUMENTARY EVIDENCE REQUIRED

<b>D.1</b>	<b>Evidence List A</b>	<b>Encl</b>
	Current GMP Certificate (must be with at least 1-year remaining validity)	<input type="checkbox"/>
<b>D. 2</b>	<b>Evidence List B</b>	<b>Encl</b>
	a. Current GMP Certificate (must be with at least 1year remaining validity)	<input type="checkbox"/>
	b. Current manufacturing license	<input type="checkbox"/>
	c. List and GMP status of regulatory inspections conducted within the past three years	<input type="checkbox"/>
	d. Copy of the most recent (not older than 2 years) inspection reports issued by Authorities (i.e. EAC, SADC, AMA, WLA and WHO-PQ Program)	<input type="checkbox"/>
	e. Market complaints register (for t h e previous three years), including one investigation report of one of the complaints classified as high risk to public health	<input type="checkbox"/>
	f. Details of any regulatory action undertaken by the regulatory agencies in the past three years (e.g. product alerts, warning letters, import alerts, recalls)	<input type="checkbox"/>
	g. Updated electronic PDF version of the Site Master File	<input type="checkbox"/>
	h. List of products intended for supply in Tanzania including;	<input type="checkbox"/>
	i. PQR report for each product	<input type="checkbox"/>
	ii. Process validation report	<input type="checkbox"/>
	iii. Batch manufacturing records for products	



	manufactured in the last 6 to 12 months	<input type="checkbox"/>
<b>D3</b>	<b>Evidence List C (Additional documents for sterile products)</b>	<b>Encl</b>
	a. Validation Master Plan	<input type="checkbox"/>
	b. Aseptic processing and filling validation reports(this is for a non-terminal sterilization process)	<input type="checkbox"/>
<b>D4</b>	<b>Evidence List D</b>	<b>Encl</b>
	a. Current Certificates (GMP, ISO/IEC 17025 Certification or WHO-PQ)	<input type="checkbox"/>
	b. Quality manual /laboratory manual or equivalent	<input type="checkbox"/>
	c. Contract or agreement between the facility and outsourced testing or sterilization institution	<input type="checkbox"/>
	d. A list of test parameters a laboratory is authorized	<input type="checkbox"/>
	e. For botanical ingredients, enclose evidence to authenticate standards references that are used	<input type="checkbox"/>

## E. DECLARATION BY APPLICANT

I, the undersigned, certify that all the information in this form and accompanying documentation is current, accurate and authentic to the best of my knowledge.

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Official stamp:

Date: \_\_\_\_\_

## Annexe II: List and description of documentary evidence

	<b>LIST AND DESCRIPTION OF DOCUMENTARY EVIDENCE</b>	<b>TMDA/DMC/MCIE/R/014</b> <b>Rev #:02</b>
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	Required evidence	Comments and Exceptions
Evidence List A	Current GMP certificate.	Certificates must have at least one year of remaining validity to cover the scope of the GMP compliance application.
Evidence List B	Current GMP certificate	Certificates must have at least one year of remaining validity to cover the scope of the GMP compliance application.
	Current manufacturing license	The manufacturing license shall be valid and show the scope of products and activities approved by the local NRA.
	Regulatory inspections conducted within the past three years, and a copy of the most recent inspection report issued by WLA, WHO-PQ and Regional Harmonisation Initiatives	Provide a list and GMP status of all inspections conducted applicable to the scope of the application. A copy of the most recent inspection report conducted within the last two (2) years must be sent to TMDA directly from the

		<p>manufacturer.</p> <p>Corrective action and preventive action (CAPA) evaluation report for the recent inspection report shall be provided</p>
	Market complaints register	<p>For the previous three years, including an investigation report for one of the complaints classified as high risk to public health</p> <p>The complaint register shall be applicable to the products applied for.</p>
	Details of any regulatory actions in the past three (3) years	For example, product alerts, warning letters, import alerts, recalls due to defects
	Site Master File	<p>Site Master File (refer to Annex III to these guidelines for writing the Site Master File)</p> <p>Site Master File shall not be required if the scope of the application is only for the step of release for supply.</p>
	<p>List of products intended for supply in the country</p> <p>a) PQR report;</p> <p>b) Process validation</p>	The PQR reports shall be provided for each product. In case of multiple products, provide one PQR report from each FPP dosage form

	<p>report; and</p> <p>c) Batch records (batch manufacturing, packaging and testing) for each product applied for marketing authorisation</p>	<p>applied for registration.</p> <p>The batch records of a product for each FPP dosage form manufactured in the last 6 to 12 months, and the corresponding process validation reports and annual product quality review reports</p>
Evidence List C	Validation Master Plan	<p>The Validation Master Plan shall be valid at the time of submission of the application.</p> <p>Not required if the scope of the application is only for the step of release for supply</p>
	Aseptic processing and filling validation reports	Required for products applied that are not terminally sterilized.
Evidence List D	Current GMP certificate or ISO/IEC accreditation certificate, or WHO prequalification	<p>For outsourced testing laboratories, a GLP certificate issued by a recognized regulatory authority or a current ISO/IEC 17025 accreditation certificate or prequalification of the laboratory by the WHO</p> <p>For outsourced sterilization facilities certification to applicable ISO sterilization standards (e.g. ISO 11137, ISO 11135)</p>
	Quality manual/laboratory manual or equivalent	The quality manual/ laboratory manual shall be written as per the WHO

	good practices for pharmaceutical quality control laboratories, or as per the ISO/IEC 17025 General requirements for the competence of testing and calibration laboratories
Contract or agreement between the FPP manufacturer and the outsourced testing laboratory or sterilization institution	A copy of the contract or agreement clearly describing the roles and responsibilities of the manufacturer and the testing laboratory or sterilization. The institution shall be submitted.
A list of test parameters a laboratory is authorized to perform as per the scope of its accreditation to the ISO/IEC 17025 or the WHO prequalification  For botanical ingredients, evidence that authenticated standard reference materials are used.	The scope of activities of the outsourced laboratory shall include the type, range and volume of testing and/or calibration, validation and verification activities it undertakes.

## **Annexe III: Model format of Site Master File (SMF) for FPP manufacturing facility**

	<b>MODEL FORMAT OF SITE MASTER FILE (SMF) FOR FPP MANUFACTURING FACILITY</b>	<b>TMDA/DMC/MCIE/R/014 Rev #:02</b>
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### **1. COVER PAGE WITH NAME AND COMPLETE ADDRESS OF THE SITE**

### **2. TABLE OF CONTENTS**

### **3. GENERAL INFORMATION**

- Contact information on the manufacturer
- Scope of production and authorized pharmaceutical manufacturing activities of the site.
- Any other manufacturing activities carried out on the site.

### **4. QUALITY MANAGEMENT**

- Brief descriptions of the quality management system and quality risk management run by the company, and reference to the Standards used;
- Responsibilities related to the maintenance of the quality system, including senior management;
- Information on activities for which the site is accredited and certified, including dates and contents of accreditations, and names of accrediting bodies; and
- Release procedure of finished products.

### **5. MANAGEMENT OF SUPPLIERS AND CONTRACTORS**

### **6. PRODUCT QUALITY REVIEWS**

- Brief description of methodologies used.

### **7. PERSONNEL**

- Organization chart, qualifications, experience and responsibilities of technical personnel
- Outline of arrangements for basic and in-service training and how records are maintained.
- Personnel hygiene requirements, including clothing.

### **8. PREMISES AND EQUIPMENT**

- a. Layout of manufacturing facilities, including three-dimensional drawings of the premises, air handling systems and water purification systems
- b. Nature of construction and finishes
- c. Brief description of planned preventive maintenance programmes for premises and of the recording system.
- d. Brief description of other relevant utilities, such as steam, compressed air, and nitrogen.
- e. Availability of written specifications and procedures for cleaning manufacturing areas
- f. List of production and quality control equipment
- g. Brief description of the procedures used for cleaning major equipment.
- h. Brief description of planned preventive maintenance programmes for equipment and of the recording system.
- i. Brief description of the company's Qualification and Calibration policy, including the recording system. Reference should be made to the Validation master plan.

## **9. DOCUMENTATION**

- a. Arrangements for the preparation, revision, distribution and achieving necessary documentation for manufacture should be stated.
- b. Brief description of the validation master plan
- c. Brief description of the change control and deviation procedures
- d. Any other documentation related to product quality that is not mentioned, such as microbiological controls on air and water.

## **10. PRODUCTION**

- a. Type of products
- b. Process validation: Material management and warehousing. Arrangements for the handling of rejected materials and products.

## **11. QUALITY CONTROL**

## **12. DISTRIBUTION, COMPLAINTS, PRODUCTS DEFECT AND RECALL**

## **13. SELF-INSPECTION**

## **14. SHELF LIFE / STABILITY DETERMINATION PROGRAM**

- a. General policy for the determination of the shelf-life and stability of products manufactured at the site.

## **15. REFERENCES**

## **16. REVISION HISTORY**



**Annexe IV: Model format of Certificate of Desk Assessment for Good Manufacturing Practices (GMP) Compliance**

**TANZANIA MEDICINES AND MEDICAL DEVICES AUTHORITY**



**CERTIFICATE OF COMPLIANCE TO GOOD MANUFACTURING PRACTICES  
(GMP) THROUGH DESK ASSESSMENT**

**Made under regulation 6 of the Tanzania Medicines and Medical Devices (Good Manufacturing Practice Enforcement) Regulations, 2018**

**GMP Certificate No.....**

Based on the desk assessment carried out on..... I certify  
that..... located at.....has been found to comply with Good  
Manufacturing Practices requirements for dosage forms and categories of medicines  
listed below:-

S/ N	Dosage Forms	Categories of Medicines	Manufacturing Operations

The responsibility for the quality of the individual batches of the pharmaceutical products manufactured lies with the manufacturer and /or marketing authorization holder.

This certificate shall remain valid until it becomes invalid if the dosage forms, operations and /or categories certified herewith are changed or if the site is no longer considered to comply with current GMP.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**DIRECTOR GENERAL**

**Note:**

- This Certificate certifies the status of the site described above
- This Certificate shall remain valid for a period of 3 years from the date of issue.

#### 4. Bibliography

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