

Implementation of a Professional Practice Assessment within a nuclear pharmacy

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Background

In **2023**, a new version of the french Good Compounding Practices (**GCP**) was issued, thus prompting our hospital to renovate the Radiopharmacy and reclassify the **cleanroom** to a **Grade C**. This requalification resulted in **adjustments to the hygiene and environmental control procedures**, followed by a presentation to the staff.

Objectives

Assess the **compliance** of the staff, operating in the cleanroom, with the **new hygiene processes**, separate from initial instructions.

Results

Table 1 : Overview table of evaluated staff

Work station	Trained personnel	Present personnel	Personnel assessed	Total (%)
LMEH	5	5	3	60%
MSC	2	2	1	50%
TRASIS	8	6	3	37.5%
HEH	2	2	0	0%

7 out of 15 trained personnel were evaluated (**47%**). Employees involved in the chart development were excluded from the evaluation (HEH).

Table 2 : Monitoring microbial growth on sampled agar plates

Work station	27/03	02/04	08/04	11/04	22/04
LMEH	/	0	/	2 UFC	0
MSC	/	/	0	/	/
TRASIS	0	/	0	0	/

Microbial growths were observed on the agar collected on the LMEH on the 11/04 and are not correlated to the evaluation with the highest number of Non Conformities.

Discussion

The limits identified for this project included:

- An incomplete evaluation of the employees
- The pre-emptive announcement that the evaluation would take place thus skewing the observations
- The lack of scoring and the vast disparity within the number of items amongst the index cards complicating the interpretation of results.

Methods

Evaluation Tool development

Professionnal Practice Assessment (PPA) chart.
SoFRA (French society of radiopharmacy).



Sorting of pre-existing items to retain only those relating to hygiene.
Adaptation of this chart to **internal procedures** based on the 2023 GCP.

Development of the chart and validation by the hospital Infection Control Team (ICT)

Scheduled assessments

Initial instructions

Hygiene cleanroom refresher meeting for the staff working within the nuclear pharmacy (Radiological technicians, Pharmacy technicians, Laboratory technicians)

Collection of **agar samples** during the assessments (aerobiocontamination and gloves)

Study: Monocentric, Prospective, Observational

Assessment Tool

- 4** distinct charts :
- Low and Medium Energy Hotcell (LMEH)
 - High Energy Hotcell (HEH)
 - Dispensation Automate (Trasis)
 - Microbiological Safety Cabinet (MSC)

A total of **10** thematic index cards were evaluated, for an average number of **74** items (56-91), **17.5** of were not included in the original SOFRA chart



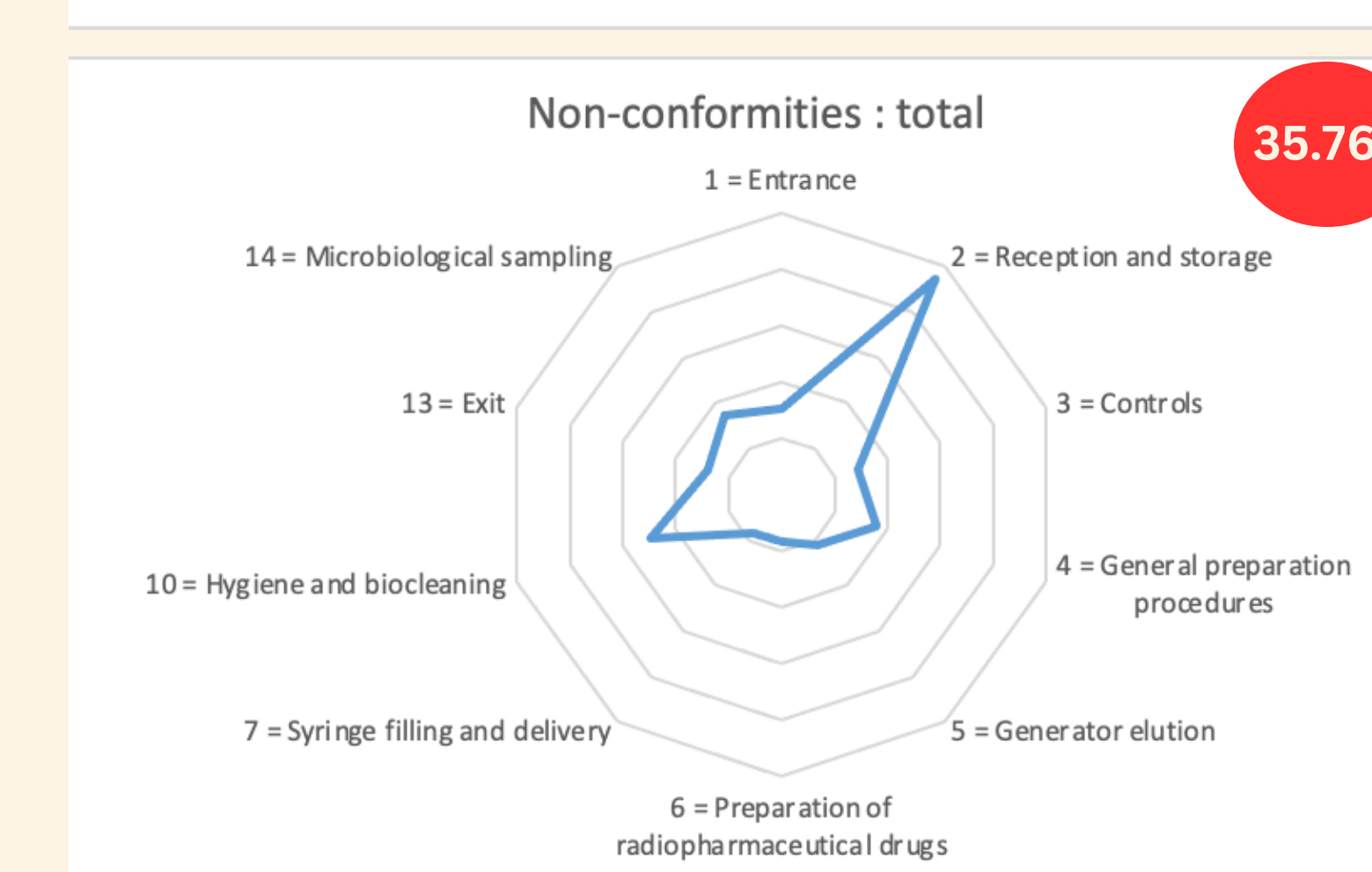
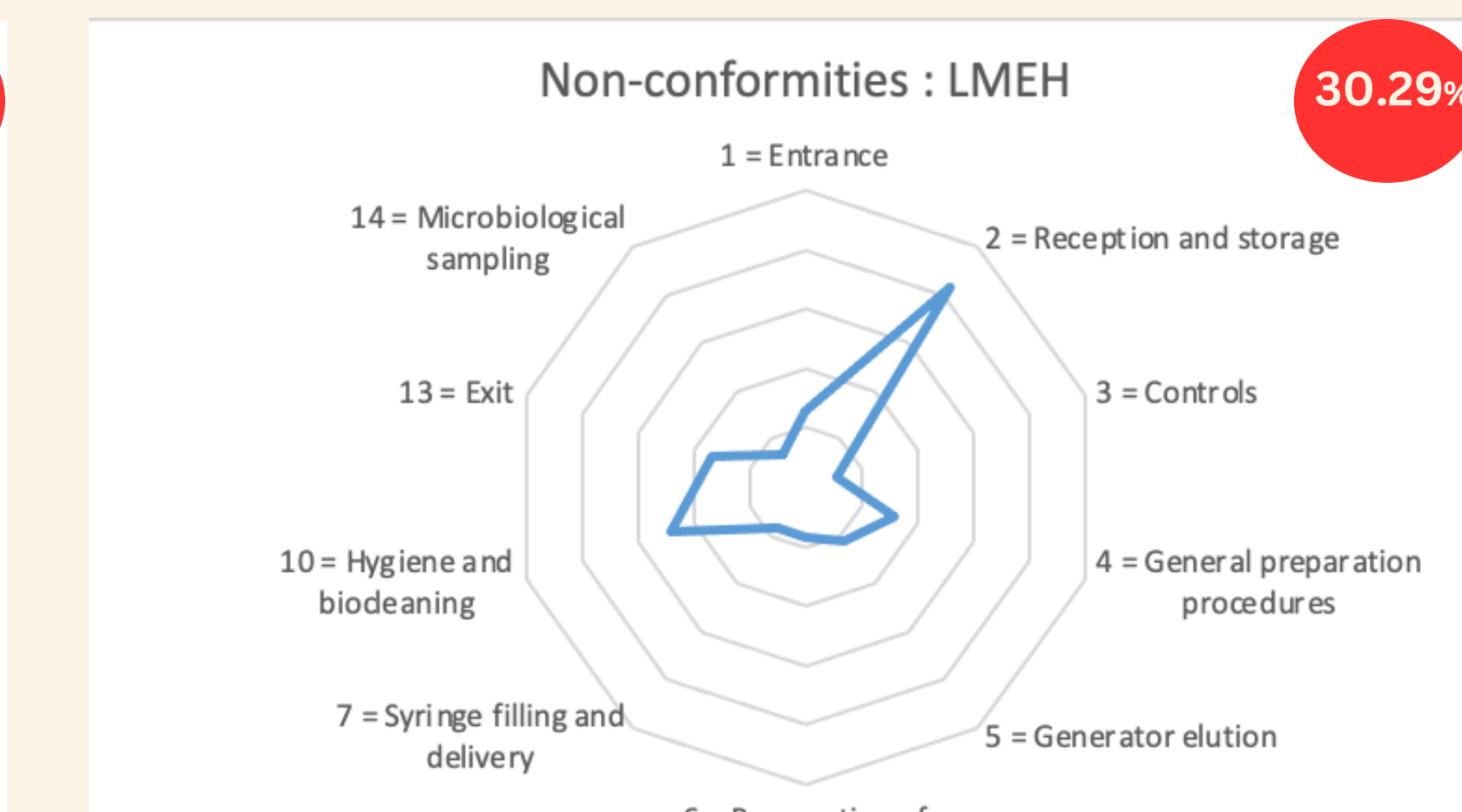
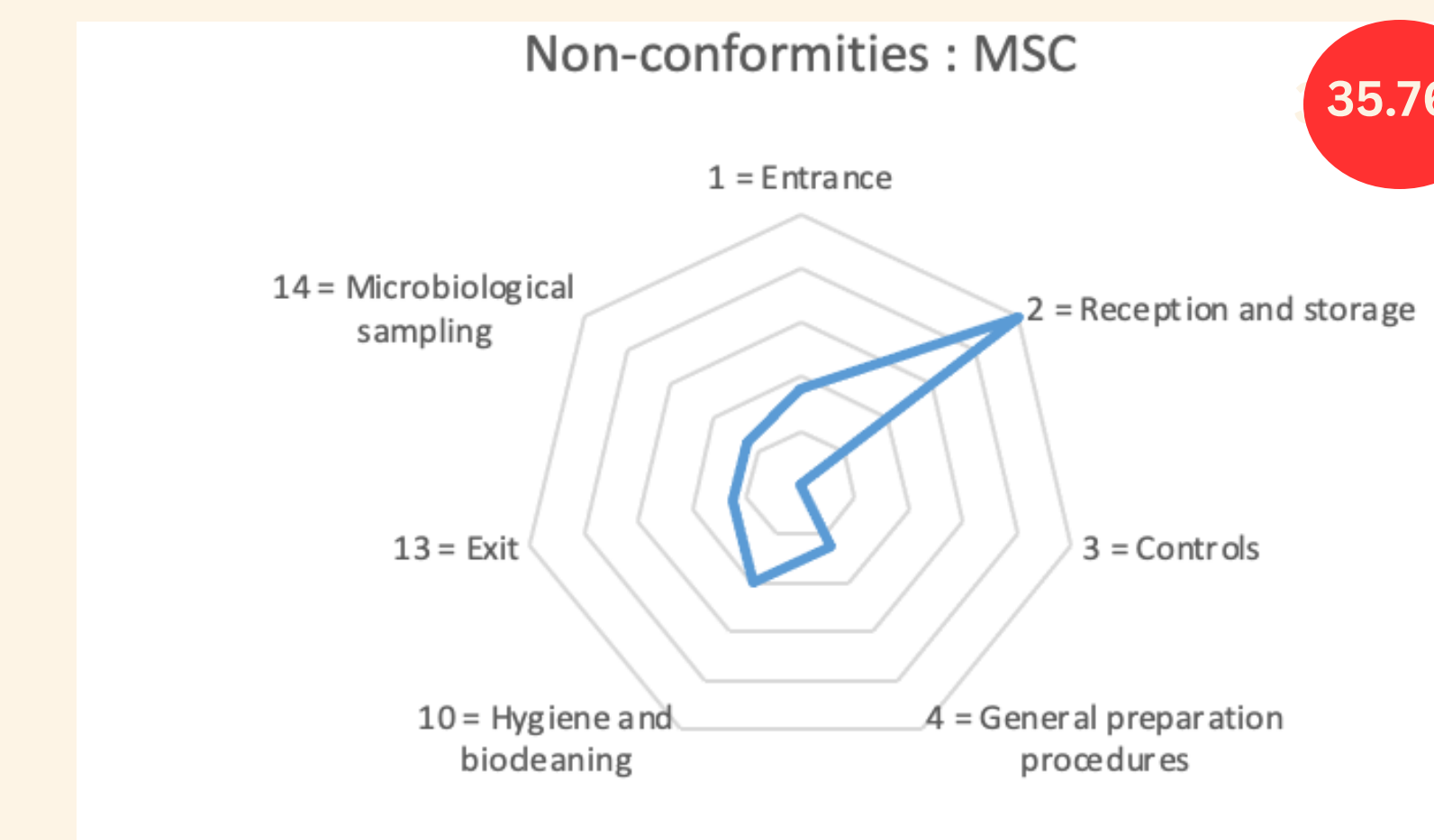
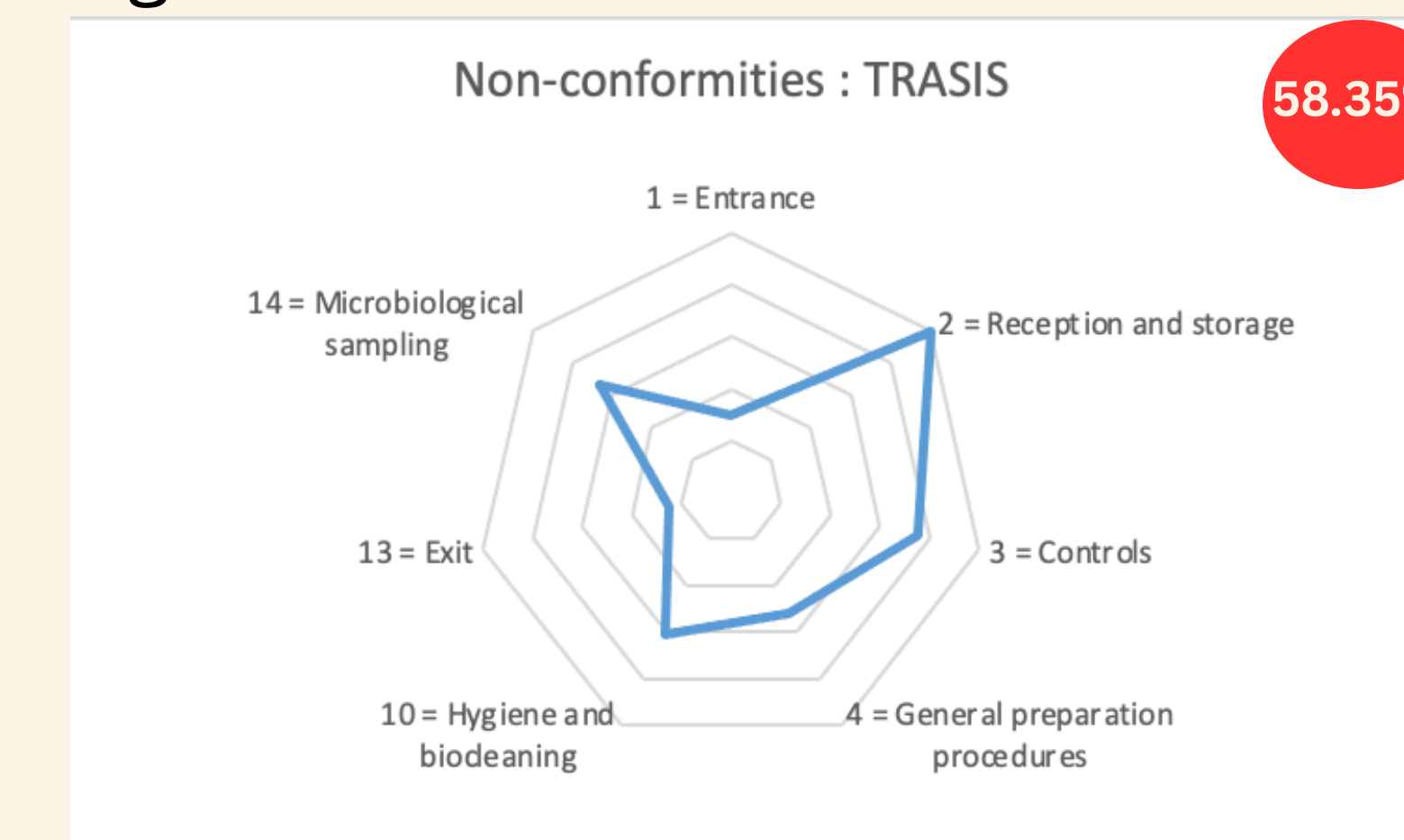
Supplementary data
Evaluation charts used

● added item

Index cards

- 1 - Entrance
- 2 - Reception and storage
- 3 - Controls
- 4- General Preparation procedures
- 5 - Generator elution
- 6-Preparation of radiopharmaceutical drugs
- 7 - Syringe filling and delivery
- 10 - Hygiene and Biocleaning
- 13 - Exit
- 14- Microbiological Sampling

Figure 1 : Overview of recorded non-conformities



The index cards with the highest rates of non-conformities are: Reception and storage (**94.5%**), Hygiene and biocleaning (**49.7%**), and General preparation procedure (**36.1%**).
In contrast, the index cards with the lowest rates of non-conformities are : Syringe filling and delivery (**16.7%**), preparation of radiopharmaceutical drugs (**16.7%**), and Generator elution (**22.22%**),
Across all index cards, the “Exit” one showed the lowest overall non-conformity rate at (**27.8%**).

Conclusion

This study helped identify **discrepancies to the GCP**, emphasizing the importance of **continuing the PPA** with the rest of the employees, as well as implementing **a training course concerning the items with the most NC**, and lastly to **conduct another PPA, remote** from the corrective measures.
Moreover, this PPA underlined the necessity of **evolving** current training methods, which are still based on a **peer-mentoring approach**.