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# **Fostering Medical Device Improvement: FDA Activities and Engagement with the Voluntary Improvement Program**

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## **Draft Guidance for Industry and Food and Drug Administration Staff**

***DRAFT GUIDANCE***

**This draft guidance document is being distributed for comment purposes only.**

**Document issued on May 6, 2022.**

You should submit comments and suggestions regarding this draft document within 60 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff, Food and Drug Administration, 5630 Fishers Lane, Room 1061, (HFA-305), Rockville, MD 20852. Identify all comments with the docket number listed in the notice of availability that publishes in the *Federal Register*.

For questions about this document, contact Compliance and Quality Staff within OPEQ:Office of Product Evaluation and Quality/IO:Immediate Office at [CaseforQuality@fda.hhs.gov](mailto:CaseforQuality@fda.hhs.gov).



**U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Devices and Radiological Health**

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## **Preface**

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1                   **Fostering Medical Device**  
2                   **Improvement: FDA Activities and**  
3                   **Engagement with the Voluntary**  
4                   **Improvement Program**

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6                   **Draft Guidance for Industry and**  
7                   **Food and Drug Administration Staff**

8  
9                   *This draft guidance, when finalized, will represent the current thinking of the Food and Drug*  
10                   *Administration (FDA or Agency) on this topic. It does not establish any rights for any person*  
11                   *and is not binding on FDA or the public. You can use an alternative approach if it satisfies*  
12                   *the requirements of the applicable statutes and regulations. To discuss an alternative*  
13                   *approach, contact the FDA staff or Office responsible for this guidance as listed on the title*  
14                   *page.*

15  
16                   **I. Introduction**

17                   The FDA’s Center for Devices and Radiological Health (CDRH) is issuing this draft guidance to  
18                   describe its policy regarding FDA’s participation in the Voluntary Improvement Program (VIP).  
19                   The VIP is a voluntary program facilitated through the Medical Device Innovation Consortium  
20                   (MDIC) that evaluates the capability and performance of a medical device manufacturer’s  
21                   practices using third-party appraisals, and is intended to guide improvement to enhance the  
22                   quality of devices. The VIP builds on the framework piloted through FDA’s 2018 Case for  
23                   Quality Voluntary Medical Device Manufacturing and Product Quality Pilot Program (CfQ Pilot  
24                   Program)<sup>1</sup> and incorporates some of the successes and learnings from the pilot.<sup>2</sup> This voluntary  
25                   program is currently only available to eligible manufacturers of medical devices regulated by  
26                   CDRH and whose marketing applications are reviewed under the applicable provisions of the  
27                   Federal Food, Drug, and Cosmetic Act (FD&C Act) (including under sections 510(k), 513, 515,  
28                   and 520).

29  
30                   The contents of this document do not have the force and effect of law and are not meant to bind  
31                   the public in any way, unless specifically incorporated into a contract. This document is intended

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<sup>1</sup> See 82 FR 61575.

<sup>2</sup> Please refer to the Case for Quality Pilot Report for additional information regarding the outcomes of the pilot program: <https://www.fda.gov/medical-devices/quality-and-compliance-medical-devices/case-quality-pilot-activities>.

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32 only to provide clarity to the public regarding existing requirements under the law. FDA  
33 guidance documents, including this guidance, should be viewed only as recommendations, unless  
34 specific regulatory or statutory requirements are cited. The use of the word *should* in Agency  
35 guidance means that something is suggested or recommended, but not required.  
36

## 37 **II. Background**

38 As part of CDRH's 2016-2017 strategic priority to “Promote a Culture of Quality and  
39 Organizational Excellence,”<sup>3</sup> CDRH envisions a future where the medical device ecosystem is  
40 inherently focused on device features and manufacturing practices that have the greatest impact  
41 on product quality and patient safety. Among its other regulatory activities, FDA evaluates  
42 manufacturers' compliance with regulations governing the design and production of devices.  
43 Compliance with the Quality System Regulation, 21 CFR Part 820, is a baseline requirement for  
44 medical device manufacturing firms.  
45

46 In an effort to elevate and enhance manufacturing practices and behaviors through which quality  
47 and safety of medical devices can be improved, FDA has collaborated with various stakeholders,  
48 brought together through the MDIC public-private partnership, to develop the CfQ Pilot  
49 Program. FDA announced the voluntary Pilot Program in the Federal Register on December 28,  
50 2017 (82 FR 61575).  
51

52 As in the CfQ Pilot Program, the VIP oversees third-party appraisers who evaluate voluntary  
53 industry participants, and the VIP assesses the capability and performance of key business  
54 processes using a series of integrated best practices. The practices are detailed in the Information  
55 Systems Audit and Control Association (ISACA) Capability Maturity Model Integration  
56 (CMMI) system. CMMI provides a roadmap that guides improvement towards disciplined and  
57 consistent processes for achieving key business objectives, including quality and performance.  
58 VIP uses a version of the CMMI appraisal appropriate for the medical device industry.<sup>4</sup> This  
59 appraisal tool is referred to as the Medical Device Discovery Appraisal Program (MDDAP)  
60 model.<sup>5</sup> The baseline appraisal using the MDDAP model covers 11 practices areas, including  
61 Estimating, Planning, and Configuration Management. As part of the VIP, and as in the CfQ  
62 Pilot Program, the VIP provides firms and FDA with information about the firm’s capability and  
63 performance for activities covered in the third-party appraisal.  
64

65 Details and results from the 2018 CfQ Pilot Program are outlined in MDIC’s Case for Quality  
66 Pilot Report.<sup>6</sup>  
67

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<sup>3</sup> [2016-2017 Strategic Priorities: Center for Devices and Radiological Health](https://www.fda.gov/media/95317/download), available at <https://www.fda.gov/media/95317/download>.

<sup>4</sup> The CMMI system is available at: <http://cmminstitute.com/>.

<sup>5</sup> For additional information on the MDDAP, please see <https://www.isaca.org/enterprise/medical-device-discovery-appraisal-program>.

<sup>6</sup> The Case for Quality Pilot Report is available at: <https://www.fda.gov/medical-devices/quality-and-compliance-medical-devices/case-quality-pilot-activities>.

### 68 **III. Program Features**

69 The VIP is a third-party quality maturity appraisal and continuous improvement program, which  
70 was developed to improve medical device production and quality. The VIP is a voluntary  
71 program, not a regulatory requirement. It reviews a participating manufacturer’s capability and  
72 performance in key business processes by having qualified, third-party appraisers visit  
73 participant firms to observe the firm’s practices. The appraisers evaluate the firm’s practices for  
74 the business processes established in the appraisal scope against the integrated best practices  
75 within the CMMI model. Then, based on the third-party appraiser’s evaluation of a participant’s  
76 practices, the VIP identifies the firm’s strengths and potential opportunities for improvement.  
77 The VIP allows the third-party appraiser to share some of that information with FDA. For  
78 example, the Agency receives de-identified, aggregate information from this program.

79  
80 The site visit and/or analysis is not intended to be a regulatory inspection or an audit, and  
81 appraisers do not assess the firm’s compliance with applicable regulatory standards. Appraisers  
82 do not collect evidence during their site visit, and do not make regulatory observations or  
83 findings. Although the VIP produces information conveyed to both the firm and to FDA, it does  
84 not issue a rating or a certification.

85  
86 Participating manufacturing sites who demonstrate sustained capability and performance, or  
87 improvements in the appraisal results, may benefit from several opportunities that the VIP offers,  
88 following FDA’s review of the site’s appraisal, including:

- 89  
90 • ***Opportunity for FDA Consideration in Risk-Based Inspection Planning*** – Section 701  
91 of the FDA Reauthorization Act of 2017 (FDARA) amended section 510(h)(2) of the  
92 FD&C Act to require FDA inspections of device establishments to occur “in accordance  
93 with a risk-based schedule established by the Secretary.” In establishing such a schedule,  
94 section 510(h)(4) requires FDA to consider the following factors: (1) the compliance  
95 history; (2) the record, history, and nature of recalls linked to the establishment; (3) the  
96 inherent risk of the device manufactured, prepared, processed at the establishment; (4) the  
97 inspection frequency and history of the establishment, including whether the  
98 establishment has been inspected pursuant to section 704 within the last 4 years; (5)  
99 whether the establishment has been inspected by a foreign government or agency  
100 recognized under section 809; and (6) any other criteria deemed necessary and  
101 appropriate by the Secretary for the purposes of allocating inspection resources.

102  
103 While appraisals performed through the VIP do not constitute a new regulatory  
104 requirement or serve as an equivalent to an FDA inspection, FDA may consider the  
105 results and data from these appraisals, as appropriate, in risk-based inspection planning.  
106 FDA retains the inspection authority granted under the FD&C Act and may conduct  
107 inspections at VIP sites, including, but not limited to surveillance, premarket, or for cause  
108 inspections as appropriate.

- 109  
110 • ***Opportunity to Utilize a Modified Submission Format for Premarket Approval***  
111 ***Application (PMA) and Humanitarian Device Exemption (HDE) 30-Day Change***

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112 *Notices for Modifications to Manufacturing Procedures or Methods of Manufacture* –  
113 FDA expects to offer participating manufacturing sites the opportunity to submit 30-Day  
114 Change Notices for modifications to manufacturing procedures or methods of  
115 manufacture using a modified submission format. See Appendix A for additional  
116 information regarding proposed content of the modified submission format. FDA intends  
117 to review changes related to quality improvements within 14 calendar days as resources  
118 permit. When appropriate, FDA may use the full 30-Day review time and, when such  
119 notice is inadequate, FDA intends to inform the applicant that a 135-Day PMA  
120 supplement or 75-Day HDE supplement must be submitted as defined by section  
121 515(d)(5)(A) of the FD&C Act and 21 CFR 814.39(f) and 814.108. For more information  
122 generally regarding 30-Day Change Notices please refer to FDA’s guidance titled “[30-  
123 Day Notices, 135-Day Premarket Approval \(PMA\) Supplements and 75- Day  
124 Humanitarian Device Exemption \(HDE\) Supplements for Manufacturing Method or  
125 Process Changes.](#)”<sup>7</sup>  
126

- 127 • ***Opportunity to Utilize a Modified Submission Format for PMA and HDE***  
128 ***Manufacturing Site Change Supplements*** – FDA expects to offer participating  
129 manufacturing sites the opportunity to submit 180-Day PMA or 75-Day HDE  
130 Manufacturing Site Change Supplements using a modified submission format. See  
131 Appendix A for additional information regarding proposed content of the modified  
132 submission format. FDA intends to review such supplements as resources permit within  
133 25 calendar days. To be eligible for use of the modified submission format, the site  
134 change should be to a site already accepted into the VIP. When necessary, upon  
135 notification to the applicant, FDA may use the full 180-Day or 75-Day review time as  
136 defined by section 515(d)(5)(A)(i) of the FD&C Act and 21 CFR 814.39(a)(3), 814.108,  
137 and 814.114. For more information generally regarding 180-Day PMA or 75-Day HDE  
138 Manufacturing Site Change Supplements please refer to FDA’s guidance titled  
139 “[Manufacturing Site Change Supplements: Content and Submission.](#)”<sup>8</sup>  
140
- 141 • ***Opportunity to Utilize a Modified Submission Format for PMA or HDE -***  
142 ***Manufacturing Modules*** – FDA expects to offer participating manufacturing sites the  
143 opportunity to submit manufacturing modules for a PMA or HDE using a modified  
144 submission format for review by FDA staff. See Appendix A for additional information  
145 regarding proposed content of the modified submission format. For more information  
146 generally regarding the submission format for PMA or HDE manufacturing modules  
147 please refer to FDA’s guidance titled “[Quality System Information for Certain Premarket  
148 Application Reviews.](#)”<sup>9</sup>  
149

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<sup>7</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/30-day-notices-135-day-premarket-approval-pma-supplements-and-75-day-humanitarian-device-exemption>

<sup>8</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/manufacturing-site-change-supplements-content-and-submission>

<sup>9</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/quality-system-information-certain-premarket-application-reviews>

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150 FDA aims to remain agile and continue to actively engage with MDIC to improve processes and  
151 features of the VIP as the program generates new data and the program evolves. FDA may  
152 provide examples, share lessons learned, or expand innovative approaches with the participating  
153 organizations in order to continue to improve the effectiveness and efficiency of VIP.  
154

## 155 **IV. Voluntary Improvement Program Operations**

156 The VIP uses the CMMI Maturity Model for Development Version 2.0 and the Medical Device  
157 Discovery Appraisal Program (MDDAP) to perform an appraisal of capabilities and performance  
158 of the medical device manufacturer's current business processes for achieving quality objectives  
159 against the best practices outlined by the maturity model. The MDDAP program is administered  
160 by the CMMI Institute<sup>10</sup>, which also certifies and coordinates third-party appraisers, maintains  
161 the detailed results of the appraisals, and evaluates the collected data. To establish the scope of  
162 the appraisal, the appraisal team<sup>11</sup> is expected to meet with participants' staff and obtain  
163 information regarding work units, products manufactured, the number of employees, and the  
164 manufacturing volume. Appraisers use this information to help determine the evaluation strategy  
165 and appropriate sampling across products and processes. Appraisers may also use this  
166 information to evaluate the participant's business processes for meeting quality objectives by  
167 comparing how participant manufacturers meet the best practices outlined by the maturity model.  
168 The appraisal team may use such information to identify opportunities to improve. This is  
169 intended to provide the participating manufacturer with a rich dataset and granularity that reflects  
170 its own organizational performance against the practices outlined in the maturity model, and a  
171 roadmap to improve performance, increase quality, and enhance value. FDA also benefits by  
172 receiving a summary of the firm's results and aggregated results across all participating  
173 manufacturers. Additional details of the process for MDDAP appraisals can be found at  
174 <https://cmmiinstitute.com/medicaldeviceapplication>.  
175

### 176 **A. VIP Eligibility**

177 To participate in VIP, manufacturing sites should meet specified enrollment criteria.  
178 Manufacturing sites are also expected to meet additional participation criteria, including an  
179 MDDAP appraisal. Both the enrollment and participation criteria are available at  
180 <https://cmmiinstitute.com/products/mddap/program-requirements#enrollment>.  
181 FDA intends to review and confirm an applicant's eligibility for enrollment in the VIP. Any  
182 current CfQ Pilot Program participants who wish to participate in the VIP do not need to reapply  
183 and are considered enrolled in the VIP unless they express an intention to withdraw (and subject  
184 to the principles outlined in Section V.C below).  
185

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<sup>10</sup> Information regarding the CMMI Medical Device Discovery Appraisal Program is available at:  
<https://cmmiinstitute.com/medicaldevice>.

<sup>11</sup> The appraisal team is comprised of a lead appraiser, who serves as the designated representative for the team, and additional appraisal team members determined by the scope of the appraisal, size of the participating organization, and appraisal duration.

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186 If a manufacturing site believes that it meets the enrollment criteria and would like to be  
187 considered for participation in VIP, it may apply at  
188 <https://cmminstitute.com/medicaldeviceapplication>.  
189

190 If you have questions regarding enrollment, contact the FDA at [CaseforQuality@fda.hhs.gov](mailto:CaseforQuality@fda.hhs.gov).  
191

## 192 **B. Additional Eligibility Considerations**

193 Generally, to be eligible for the VIP, a manufacturer is expected to have a history of being in  
194 compliance with the applicable requirements of the FD&C Act and its implementing regulations.  
195 On a case-by-case basis, VIP may consider enrolling manufacturing sites that do not have  
196 previous compliance history with the Agency, including for example: manufacturers that may  
197 not be responsible for complying with 21 CFR Part 820 (i.e., component manufacturers) and/or  
198 firms that do not meet all of the eligibility factors outlined above. These companies may be able  
199 to benefit from the VIP by building capability in their employees and processes and focusing on  
200 continuous improvement in the same way as the companies that have established a good  
201 compliance standing with the Agency. These companies may not be eligible for certain  
202 opportunities offered under the program, as noted in Section III above, until FDA has verified  
203 the manufacturer is in compliance with the FD&C Act and its implementing regulations.  
204

## 205 **C. VIP Participating Manufacturing Site Expectations**

206 The VIP anticipates that participating manufacturing sites:

- 207 • Receive an annual appraisal.
- 208 • Engage with appraisers and commit to the proposed appraisal process.
  - 209
  - 210
  - 211
  - 212 ○ Appraisers are encouraged to stop the appraisal at any time in the process if a
  - 213 manufacturer does not engage as the appraiser expects, or if the manufacturer fails
  - 214 to follow any of the appraisal process boundaries and expectations, mutually
  - 215 agreed upon during the appraisal scoping. The appraiser may follow its
  - 216 established process with the VIP or involve FDA.
  - 217
- 218 • Perform a quarterly progress check-in with lead appraisers. The Agency may consider
- 219 recommendations from recognized third-party appraisal programs regarding frequency of
- 220 check-ins as participants demonstrate increased performance or capability in their
- 221 business process.
- 222
- 223 • Submit quality performance measures according to the criteria set forth in the CMMI
- 224 system and appraisal method. These measures fall into the quality domains of safety,
- 225 effectiveness, reliability, and availability, but VIP does not prescribe individual
- 226 performance measures, only that they be relevant to participants. Information provided by
- 227 the participants establishes context for a given performance measure, including:

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- 228 ○ the quality objective of the measure
- 229 ○ business objective of the measure
- 230 ○ name or title of the measure
- 231 ○ the level of the measure (e.g., product, aggregate, site)
- 232 ○ how the measure is calculated
- 233 ○ indications of good performance
- 234 ○ known limitations of the measure or data
- 235 ○ why the measure matters/how the measure is used
- 236 ○ how often the measure is captured
- 237 ○ how often the measure is reported within the organization (i.e., daily, monthly,
- 238 quarterly)

239

240 Please refer to Appendix B for an illustrative example of how participants could define  
241 this performance measure information.

242

- 243 ● Proactively notify FDA regarding product safety issues or recalls following all current  
244 regulatory requirements, including reporting (see also Section V.B below).

245

## 246 **D. VIP Process Flow**

247 The process flow for participation in the VIP is as follows:

248

- 249 ● Manufacturing sites apply to participate in the VIP through the application portal at  
250 <https://cmminstitute.com/medicaldeviceapplication>.
- 251
- 252 ● The participating manufacturing site's application information is provided to FDA by the  
253 recognized third-party appraisal program. FDA intends to review manufacturing site  
254 application(s) within 5 calendar days and provide confirmation to the manufacturing site  
255 and the recognized third-party appraisal program of eligibility for participation in VIP. If  
256 FDA does not agree that the manufacturing site has met the eligibility criteria for  
257 enrollment, the site will be notified accordingly.
- 258
- 259 ● The third-party appraisal program notifies FDA when a contract for appraisal between  
260 recognized third-party appraisal program and the participating manufacturing site has  
261 been established, and provides FDA with the appraisal schedule.
- 262
- 263 ● The participating manufacturing site and the recognized third-party appraisal program are  
264 expected to scope, coordinate, and execute the appraisal. Appraisals are targeted to be  
265 conducted within 90 calendar days from confirmation of enrollment.
- 266
- 267 ● Recognized third-party appraisal program provides FDA appraisal summary within 30  
268 calendar days of completing appraisal.
- 269

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- 270
- Participating manufacturing site meets quarterly with lead appraiser for progress checks and provides quality performance metrics.
- 271
- 272
- 273
- Participating manufacturing site and recognized third-party appraisal program plan and schedule follow-up appraisals on an annual basis and notify FDA of new focus areas, maturity practices, or progress planned for the appraisal.
- 274
- 275
- 276

277 **V. FDA Activities and Engagement with VIP**

278 FDA maintains representation on the VIP governance committee and provides input to overall  
279 program operation and changes. This ensures that VIP continues to align with FDA’s  
280 expectations of improving participating manufacturing sites’ capability and performance and that  
281 VIP provides value to industry stakeholders. VIP establishes information that a recognized third-  
282 party appraisal program should provide FDA, and that FDA intends to consider in the benefit-  
283 risk considerations FDA routinely uses to inform planning, improve FDA resource allocations,  
284 improve review efficiency, and inform risk-based inspection planning, for firms that demonstrate  
285 capability and transparency around their manufacturing and product performance.  
286

287 **A. FDA Commitment to VIP Participating Manufacturing**  
288 **Sites**

289 In response to the commitment by the participating manufacturing site to meet VIP expectations  
290 (Section IV.C) and to foster continuous improvement, safety, and transparency, FDA intends to:  
291

- 292
- Engage proactively with participating manufacturing sites to resolve any issues (such as signals, potential safety issues, or recalls) according to the principles outlined in Section V.B (Existing Regulatory Obligations and FDA Involvement).
- 293
- 294
- 295
- Contact and engage with participating manufacturing sites to discuss and resolve any issues brought to FDA’s attention during an appraisal. If there is no resolution for such issues, the appraisal should end, and the participant may no longer continue to participate in the program. Please see Section V.C below for information regarding withdrawal and removal of participants from the VIP.
- 296
- 297
- 298
- 299
- 300
- 301

302 **B. Existing Regulatory Obligations and FDA Involvement**

303 Participation in the VIP does not alter a firm’s existing regulatory obligations under the FD&C  
304 Act nor does it impact FDA’s enforcement authority under the FD&C Act. As is always the case,  
305 the Agency retains discretion to take enforcement action when appropriate. Participants are  
306 responsible for complying with all applicable laws and regulations, including the FD&C Act and  
307 its implementing regulations (including, but not limited to, 21 CFR 803, 806, 807, and 820).  
308 Information obtained through the course of the VIP is not intended to be a substitute for evidence  
309 collected during the course of an FDA inspection.  
310

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311 If issues (such as safety) are brought to FDA’s attention during a firm’s participation in the VIP  
312 program, FDA intends to collaborate with participating manufacturing sites first to mitigate the  
313 impact of the issue, then to identify and to implement the most effective and efficient resolution  
314 which may include an action plan and regular communication. In addition to notifying the  
315 relevant FDA Medical Device Program Division, the participating manufacturing site should also  
316 contact the review team in the appropriate Office of Health Technology (OHT) within CDRH’s  
317 Office of Product Evaluation and Quality (OPEQ), as well as the Case for Quality team at  
318 [CaseforQuality@fda.hhs.gov](mailto:CaseforQuality@fda.hhs.gov), to facilitate working interactively with FDA to address the  
319 identified issues that may impact participation in VIP.

320  
321 If FDA, in its discretion, determines that there has been significant and satisfactory progress  
322 towards resolution or it has been completed in the established timeline, no additional action is  
323 recommended from a VIP perspective and program opportunities available to participants  
324 continue. However, if FDA, in its discretion, determines that there has not been significant or  
325 satisfactory progress towards a resolution or the issue escalates into a serious injury or  
326 death, FDA may consider limiting program opportunities and/or recommending removal from  
327 participation in VIP as outlined in Section C below.

### **C. Withdrawal and Removal from VIP After Acceptance**

330 VIP is a voluntary program and participants may choose to withdraw from participation at any  
331 time by providing notice to the recognized third-party appraisal program or by notifying FDA at  
332 [CaseforQuality@fda.hhs.gov](mailto:CaseforQuality@fda.hhs.gov). Withdrawal from VIP may affect the opportunities provided by  
333 FDA (as identified in Sections III and IV of this guidance). Participants who withdraw from VIP  
334 may be eligible to enroll again at a later time.

335  
336 FDA and VIP participants have a shared goal to proactively and quickly address quality issues or  
337 safety risks that arise during program participation through collaboration and communication.  
338 FDA may remove participating manufacturing sites from VIP if participants do not engage with  
339 FDA on certain issues as noted in Section V.B, or for any other reason that FDA determines is in  
340 the best interest of the public health.

341  
342 Participating manufacturing site(s) in VIP who may not be fulfilling the expectations or  
343 commitments, such as by,

- 344
- 345 • missing a check point or delaying the checkpoint by greater than 60 calendar days  
346 without communication with the third-party appraiser;
  - 347 • not providing performance measures or delaying performance measures by greater than  
348 60 calendar days without communication with the third-party appraiser;
  - 349 • delaying appraisal or reappraisal by greater than 90 calendar days without  
350 communication and agreement by FDA;
  - 351 • providing false or misleading information; or
  - 352 • not fulfilling financial commitments to the third-party appraiser or delaying payments by  
353 greater than 30 calendar days unless otherwise agreed on by the third-party appraiser

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354  
355 may be subject to principles outlined in Section V.B, and, if appropriate, may have their  
356 eligibility for the program opportunities noted above (Section III) suspended for a period of time  
357 depending upon the issues identified, until VIP determines that the participant is progressing  
358 sufficiently towards resolving these issues. If participants and FDA cannot resolve any such  
359 issues by utilizing the principles and procedures described in Section V.B of this guidance, FDA  
360 may recommend a participant’s removal from VIP. Typically, participants who have been  
361 removed from VIP may not be eligible to enroll in the program again until any outstanding issues  
362 have been resolved and verified by FDA.

363  
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## 366 VI. Appendix A: Modified Submission Formats

367 Through guidance documents, FDA has made recommendations for some information that would  
368 be useful to include in certain submission types (i.e., PMA/HDE 30-Day Change Notices,  
369 PMA/HDE Manufacturing Site Change Supplements, PMA/HDE Manufacturing Modules). FDA  
370 anticipates that, in the course of the VIP, it will gain insights into the participant’s manufacturing  
371 processes and control capabilities that would likely address some recommendations for these  
372 regulatory submissions. Thus, participants in the VIP may be able to avail themselves of  
373 efficiencies that might prevent duplicate information and/or allow for least burdensome  
374 submissions<sup>12</sup> to the FDA.

### 376 **30-Day Change Notice Submissions**

377 Recommendations for content to be included in a 30-Day Change Notice are listed in FDA’s  
378 guidance titled “[30-Day Notices, 135-Day Premarket Approval \(PMA\) Supplements and 75- Day](#)  
379 [Humanitarian Device Exemption \(HDE\) Supplements for Manufacturing Method or Process](#)  
380 [Changes.](#)”<sup>13</sup> FDA anticipates that, during the course of the VIP, participants may provide FDA  
381 with information that will likely address some FDA recommendations regarding 30-Day Change  
382 Notices. The results of the appraisal and the VIP performance metrics may provide FDA with an  
383 understanding of the participating site’s control capabilities and sufficient assurances to make a  
384 knowledgeable judgment about the quality control used in the manufacture of the device. FDA  
385 anticipates creating a modified submission format available to VIP participants for addressing  
386 the remainder of those recommendations.

- 387  
388 • The VIP appraisal evaluates the participating site’s capability to support, manage,  
389 sustain, and improve its established processes. As such, FDA intends to offer VIP  
390 participants the opportunity to use a modified submission format which does not  
391 recommend:
  - 392  
393 ○ *A summary of the procedures established for the identification, documentation,*  
394 *validation, review, and approval of the manufacturing changes submitted in the*  
395 *30- day notice.*
  - 396  
397 ○ *A description of how you will monitor and control any manufacturing process*  
398 *you intend to change.*
  - 399  
400 ○ *Within the summary of the completed validation study that demonstrates that the*  
401 *manufacturing change can be made without significantly changing the operation*  
402 *of the final device, an explanation of how change control procedures were*  
*implemented, including whether the submitter modified the manufacturing or*  
*quality control instructions, or the manufacturing specifications.*

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<sup>12</sup> FDA defines “least burdensome” to be the minimum amount of information necessary to adequately address a relevant regulatory question or issue through the most efficient manner at the right time. See also [The Least Burdensome Provisions: Concept and Principles](#), available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/least-burdensome-provisions-concept-and-principles>.

<sup>13</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/30-day-notices-135-day-premarket-approval-pma-supplements-and-75-day-humanitarian-device-exemption>

## ***Contains Nonbinding Recommendations***

### ***Draft – Not for Implementation***

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- *A summary of how purchasing control procedures were implemented to evaluate any new supplier or contractor, if the manufacturing change involves changes in suppliers of components or raw materials that are critical to the performance of the device, or the use of a new contractor for a manufacturing process or quality control testing.*
  - *A description of the type and extent of control to be exercised over the component or raw material, including specifications for the incoming material and a description of in-coming acceptance activities. Also, a description of any testing that was completed to evaluate the use of the component or material and include a summary of the data.*
  - During the course of the VIP, the appraisal is expected to evaluate sampling methods. As such, FDA intends to offer VIP participants the opportunity to use a modified submission format which does not recommend:
    - *the statistical rationale for the sampling method, if the submitter plans to verify the changed processes by routine sampling and independent measurement.*
  - Other FDA recommendations from the guidance may also be addressed as follows:
    - *A description of the device may be replaced by the Device Identifier (DI), as applicable.*
    - *An identification of the manufacturing facilities where the change will be implemented may be captured through the FEI and CMMI Appraisal Numbers.*

### **PMA/HDE Manufacturing Site Change Supplement**

429 Recommendations for content to be included in a PMA or HDE Manufacturing Site Change  
430 Supplement are listed in FDA’s guidance titled “[Manufacturing Site Change Supplements:  
431 Content and Submission](#).”<sup>14</sup> FDA anticipates that, during the course of the VIP, participants may  
432 provide FDA with information that will likely address some FDA recommendations regarding  
433 Manufacturing Site Change Supplements. The results of the appraisal and the VIP performance  
434 metrics may provide FDA with an understanding of the participating site’s control capabilities  
435 and sufficient assurances to make a knowledgeable judgment about the quality control used in  
436 the manufacture of the device. FDA anticipates creating a modified submission format available  
437 to VIP participants for addressing the remainder of those recommendations.

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- The VIP appraisal evaluates the participating site’s capability to support, manage, sustain, and improve their established processes. As such, FDA intends to offer VIP participants the opportunity to use a modified submission format which does not recommend:

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<sup>14</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/manufacturing-site-change-supplements-content-and-submission>

## ***Contains Nonbinding Recommendations***

### ***Draft – Not for Implementation***

- 444 ○ *If the manufacturing site change results in the use of a different supplier or*  
445 *contract manufacturer, within the current purchasing control procedures*  
446 *detailing the supplier evaluation process:*  
447  
448     ▪ *How the submitter maintains records of acceptable suppliers and how the*  
449 *submitter addresses the purchasing data approval process.*  
450     ▪ *How the submitter balances purchasing assessment and receiving*  
451 *acceptance to ensure that products conform to specified requirements.*  
452

453 Additionally, based upon review of control capabilities as part of the VIP appraisal, FDA  
454 intends to offer VIP participants the opportunity to use a modified submission format  
455 which does not recommend the following for processes that are consistent across  
456 manufacturing sites:  
457

- 458 ○ *A description of the equipment and processes that would be affected by the site*  
459 *change.*  
460 ○ *A list of any standards used in the new manufacturing processes, if applicable*  
461 ○ *The process validation or revalidation procedures (and reports, if applicable)*  
462 ○ *The procedures for environmental and contamination controls if such conditions*  
463 *could adversely affect the device (21 CFR 820.70).*  
464 ○ *If different from the original PMA, any procedures that explain how inspection,*  
465 *measuring, and test equipment are routinely calibrated, inspected, checked, and*  
466 *maintained (21 CFR 820.72). If this involves a large number of procedures, a*  
467 *sample of the most relevant procedures would be sufficient. If procedures are the*  
468 *same as those contained and approved in the original PMA, the submitter should*  
469 *provide a statement indicating this.*  
470 ○ *The procedures for the incoming acceptance activities at the subject*  
471 *manufacturing site, if different from the procedures contained and approved in*  
472 *the original PMA. If procedures are the same as those contained and approved in*  
473 *the original PMA, the submitter should provide a statement indicating this.*  
474 ○ *The procedures for the final acceptance activities at the subject manufacturing*  
475 *site, if applicable and different from the procedures contained and approved in*  
476 *the original PMA. If procedures are the same as those contained and approved in*  
477 *the original PMA, the submitter should provide a statement indicating this.*  
478

479 However, if processes differ from the original manufacturing site, FDA may continue to  
480 recommend one or more of the previously listed elements.  
481

- 482 ● FDA anticipates reviewing a VIP participant's master plan as a part of a manufacturing  
483 site change supplement. As such, FDA intends to offer VIP participants the opportunity  
484 to use a modified submission format which does not recommend:  
485  
486 ○ *A list of processes at the new site that the submitter does not plan to validate but*  
487 *will verify by inspection and test.*  
488

## *Contains Nonbinding Recommendations*

### *Draft – Not for Implementation*

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- Other FDA recommendations may also be addressed as follows:

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    - *A description of the device[...]* may be replaced by the Device Identifier (DI), as applicable.    - The FEI and CMMI Appraisal Numbers may also be useful to identify the site.
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#### **PMA/HDE Original Manufacturing Module**

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497 Recommendations for content to be included in a PMA or HDE Original Manufacturing Module  
498 are listed in FDA’s guidance titled “[Quality System Information for Certain Premarket](#)  
499 [Application Reviews](#).”<sup>15</sup> FDA anticipates that, during the course of the VIP, participants may  
500 provide FDA with information that will likely address some FDA recommendations regarding  
501 PMA/HDE Original Manufacturing Modules. Because participation in VIP depends upon FDA’s  
502 verification that the manufacturer is in compliance with the FD&C Act and its implementing  
503 regulations, FDA anticipates that the recommendations regarding information to provide about  
504 the design control process (i.e., recommendations under 21 CFR 820.30) will likely have already  
505 been verified and reviewed accordingly. Additionally, the results of the appraisal and the VIP  
506 performance metrics may provide FDA with an understanding of the participating site’s control  
507 capabilities and sufficient assurances to make a knowledgeable judgment about the quality  
508 control used in the manufacture of the device. FDA anticipates creating a modified submission  
509 format available to VIP participants for addressing the remainder of those recommendations.

510

- FDA anticipates that the following recommendation from the guidance will likely be addressed for VIP participants based upon their inspection/audit history:

511

    - *You should provide a copy of your basic quality system procedure(s).*
  - Several items may only continue to be recommended from VIP participants if the processes or procedures for controls have changed since last FDA review. This includes information regarding:

512

    - *Production and Process Controls, 21 CFR 820.70*
    - *Inspection, Measuring, and Test Equipment, 21 CFR 820.72*
    - *Receiving Acceptance Activities, 21 CFR 820.80(b)*
    - *Final Acceptance Activities, 21 CFR 820.80(d)*
    - *Nonconforming Products, 21 CFR 820.90*
    - *Complaint Files, 21 CFR 820.198*
    - *Servicing, 21 CFR 820.200*
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528 The Device Identifier (DI), as applicable, and FEI and CMMI Appraisal Numbers may also be  
529 useful to describe the device and identify the site, respectively.

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<sup>15</sup> <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/quality-system-information-certain-premarket-application-reviews>

*Contains Nonbinding Recommendations*

*Draft – Not for Implementation*

530 **VII. Appendix B: Performance Measures Example**

531 The following table is an example of how a participant may define its performance measures.  
 532 VIP expects that participants will provide appraisers, who will then in turn provide FDA, with  
 533 these, or other, definitions, and provide FDA with data quarterly, as described above in Section  
 534 IV.C.  
 535

Performance Measure Information	Quality Domain			
	Safety <i>(Device does not compromise the clinical condition or the safety of patients, or the safety and health of users.)</i>	Reliability <i>(Device system or component is able to function under stated conditions for a specified period of time.)</i>	Availability <i>(Device is available to fill first request orders.)</i>	Effectiveness <i>(Device produces the effect intended by the manufacturer relative to the medical condition(s).)</i>
<b>Quality Objective</b>	Reduce Field Actions	Product is serviced correctly, the first time it is serviced	Demonstrate ability to operate in a full state of control	Continuously improve the safety and reliability of our products
<b>Business Objective</b>	Improved patient safety and customer experience	Develop, test, and maintain products that consistently meet customer and business expectations	Customers orders are filled completely and on time, every time.	Improve patient health and contribute to better quality of life
<b>Measure Title</b>	Number of Field Actions	First Pass Yield	Backorder  On Time and In Full (OTIF)	Complaint Rate (CRR) (as reported)  Compliant Incidents per Million (CIPM)
<b>Level of Measure</b>	Product	Aggregate across all products at site	Aggregate across all products for entire site	Aggregate across all products at site
<b>How Measure is Calculated</b>	Count of actions taken on products outside of distribution control	Percentage of passing final serviced units compared to total units serviced	Backorder Over (BO) Days of Sales = (90 Days Average)  Order w/o BO, w/o complaints / Shipped = 30 Days Average	Sum of the quantity of complaint incidents  Incidents as related to units released
<b>Indication of good performance</b>	The value decreases with target of 0	The value increases	Backorder: Decreasing from target  OTIF: Increasing from target	The value decreases
<b>Limitations or blind spots</b>	None identified	None identified	None identified	None identified
<b>Why the measure matters/How is it used</b>	Helps identify necessary product changes/reviewed quarterly in our Management Review process	Helps identify necessary product changes/ Results are used as part of our trending process and also reviewed in Management Review	Ensure our customers are receiving what they expect and when they expect it.	Helps identify necessary product changes/ Results are used as part of our trending process and also reviewed in Management Review
<b>Capture Frequency</b>	Monthly	Monthly	Weekly	Daily
<b>Organization Reporting Frequency</b>	Quarterly	Quarterly	Quarterly	Quarterly

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