

1 **Chapter 4: Documentation**

2 **Reasons for changes:** The GMP/GDP Inspectors Working Group and the PIC/S Committee jointly
3 recommended that the current version of Chapter 4, on documentation, is revised to reflect changes in
4 regulatory and manufacturing environments. The revised guideline clarifies requirements and expecta-
5 tions from Regulatory Authorities with regards to documentation and takes into account related changes
6 for Annex 11 of the GMP Guide.

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7 **PRINCIPLE**

- 8 4.1. Documentation constitutes an essential part of the quality assurance system and is key to op-
9 erating in compliance with GMP requirements. The various types of documents and means
10 used should be fully understood and defined in the regulated user's pharmaceutical quality
11 system.
- 12 4.2. It should be determined by the regulated user which legal provisions apply to documentation
13 considering new technologies, hybrid solutions and services used.
- 14 4.3. Appropriate documentation practices should be applied with respect to the type of document
15 regardless of the applied technology or service used.
- 16 4.4. The present document was supplemented by requirements regarding new technologies, hybrid
17 solutions and new services, whereby a risk-based approach as element of a data governance
18 system is considered pivotal for scalability of integrity control measures.
- 19 4.5. Quality risk management principles should be applied to ensure that the pharmaceuti-
20 cal quality system includes sufficient instructional details. It should facilitate a common
21 understanding of the requirements. In addition to providing for recording of the various pro-
22 cesses and risk-based evaluation of any observations, it should demonstrate the ongoing appli-
23 cation of all requirements.
- 24 4.6. Suitable controls should be implemented using a risk-based approach to ensure the accuracy,
25 integrity, availability, and legibility of documents. Documents should be free from errors and
26 available in human readable form.
- 27 4.7. Documentation may exist in a variety of forms, including paper-based, electronic, or other
28 means (e.g. photography, imagery, video and audio recordings). The main objective of the
29 documentation system is to establish, control, monitor and record all activities which directly
30 or indirectly impact on all aspects of the quality and safety of medicinal products, using a risk-
31 based approach.
- 32 4.8. Whether documents are created, stored, and managed electronically, paper based, by other
33 means or through a hybrid system, they must meet the same GMP requirements for legibility,
34 accuracy, integrity, and completeness throughout the whole lifecycle. This also applies when
35 documentation is outsourced.
- 36 4.9. There are two primary types of documentation used to manage and demonstrate GMP compli-
37 ance:
- 38 i. instructions (directions, requirements) and
 - 39 ii. records/reports.

40 **DATA GOVERNANCE SYSTEMS**

- 41 4.10. Regardless of how documents are created, handled, stored, and managed (i.e., using elec-
42 tronic, paper-based, or hybrid systems), the regulated user should establish a data governance
43 system integral to the pharmaceutical quality system to define, prioritise and communicate
44 their data integrity risk management activities. Arrangements for data governance should be
45 documented and reviewed regularly.
- 46 4.11. Regulated users should design and operate a data governance system which provides an ac-
47 ceptable state of control based on the risk assessment, which is documented with supporting
48 rationale. A data governance system should be consistent with the principles of quality risk
49 management.
- 50 4.12. To ensure integrity of data the governance system should cover the entire data lifecycle and
51 ensure controls commensurate with the principle of quality risk management. The data lifecy-
52 cle should refer to:
- 53 i. Creation and recording of data.
 - 54 ii. Processing of (raw) data to reported (derived) data.

- 55 iii. Verification of completeness, consistency and accuracy of all data (raw and derived
56 data). For derived data the traceability which allows reconstruction of all data pro-
57 cessing activities should be maintained.
- 58 iv. Decision making relying on data (or derived data).
- 59 v. Retaining, archiving and retrieval of data. To protect it from loss or unauthorised al-
60 teration it should be commensurate with the principles of quality risk management.
- 61 vi. Retirement or destruction of data at the end of the lifecycle in a controlled manner.
- 62 4.13. Data governance systems should rely on a risk management approach and consider:
- 63 i. Data criticality (impact to decision making and product quality) and
- 64 ii. Data risk (opportunity for data alteration and deletion, and likelihood of detection /
65 visibility of changes by the regulated user's routine review processes).
- 66 4.14. Data governance systems should rely on the incorporation of suitably designed systems, the
67 use of technologies and data security measures, combined with specific expertise to ensure
68 that data integrity is effectively controlled over the data lifecycle.
- 69 4.15. Data governance systems should address data ownership throughout the entire lifecycle.
- 70 4.16. Data governance systems should consider the design, operation and monitoring of processes
71 and systems to comply with the principles of data integrity.
- 72 4.17. Data governance systems should consider risk mitigation. The effectiveness of risk mitigation
73 measures should be reviewed regularly, regardless of whether they are temporary or perma-
74 nent. Residual risks should be reviewed periodically and communicated to management.
- 75 4.18. Data governance systems should consider and ensure the periodic review of service provider's
76 data management policies and risk control strategies intended to minimise potential risks to
77 data integrity. The frequency of such reviews should be based on the criticality of the services
78 provided, using risk management principles.

79 **RISK MANAGEMENT**

- 80 4.19. The regulated user should adopt a risk-based approach in documentation throughout the entire
81 lifecycle of data, regardless of the technology, hybrid solution or service used and should
82 demonstrate an understanding for data criticality, data risk and data quality.
- 83 4.20. Controls over the data lifecycle should be established which are commensurate with the prin-
84 ciples of quality risk management. The depth of data governance and risk management activ-
85 ities should be justified and commensurate with the risks to product quality and patient safety.
- 86 4.21. Decisions on the extent of measures to ensure data integrity should be based on a documented
87 rationale and documented risk assessment taking into consideration data criticality and data
88 risk.
- 89 4.22. Irrespective of processes used to generate electronic data, they must be included in the re-
90 quirements for the qualification or validation of the relevant computerised systems according
91 to Annex 11.

92 **GENERAL REQUIREMENTS FOR DOCUMENTATION**

- 93 4.23. The pharmaceutical quality system should describe all documents required to ensure product
94 quality and patient safety. Documents may be created, recorded, provided, approved, commu-
95 nicated, stored, and archived electronically, paper based or in a hybrid system. The reliance
96 on electronic, paper-based or different means, hybrid solutions or hosted services in mainte-
97 nance and retention of documentation requires the compliance with all EU GMP provisions
98 including Annex 11 if decision making in manufacturing (e.g. batch release based on in-pro-
99 cess controls and process analytical technologies) is supported by automatic validation scripts
100 or artificial intelligence (Annex 22).
- 101 4.24. The accountability for the integrity of documents, records or (raw) data produced or processed

- 102 with artificial intelligence or any other automatic means (e.g. validation scripts) rests with the
103 regulated user.
- 104 4.25. The support by any automatic means (e.g. validation scripts or artificial intelligence) should
105 be included in a pharmaceutical quality system regardless of the service located on premise
106 or as a hosted service. The records created electronically should enable a trend analysis of
107 quality-critical data.
- 108 4.26. To ensure data integrity, data which is recorded or processed electronically should not be
109 converted to or stored in a paper form unless it meets the requirements set out in section 13
110 “hybrid systems” or the conversion is validated or verified for accuracy.

111 MASTER DOCUMENTS

- 112 4.27. Specifically required master documents (not exhaustive list):
- 113 i. **Site Master File:** Refer to EU GMP Guidelines, Volume 4 “Explanatory Notes on
114 the preparation of a Site Master File”.
- 115 ii. **Validation Master Plan:** A document describing the key elements of the site qualifi-
116 cation and validation program. Master documents should be evaluated and reviewed
117 on a regular basis.
- 118 iii. **Instructions** (directions, or requirements) type:
- 119 - **Specification:** Refer to glossary for definition
- 120 - **Manufacturing Formulae, Processing, Packaging and Testing Instruction:** Pro-
121 vide complete detail on all the starting materials, equipment, and computerised sys-
122 tems (if any) to be used and specify all processing, packaging, sampling, and testing
123 instructions to ensure batch to batch consistency. In-process controls and process an-
124 alytical technologies to be employed should be specified where relevant, together
125 with acceptance criteria.
- 126 - **Procedures:** (Otherwise known as Standard Operating Procedures, or SOPs), docu-
127 mented set of instructions for performing and recording operations.
- 128 - **Protocol:** defined set of activities to provide instructions for performing and record-
129 ing certain discreet operations.
- 130 - **Technical / Quality Agreement:** Written proof of agreement between contract givers
131 and acceptors for outsourced activities.
- 132 iv. **Record/Report type:**
- 133 - **Record:** Provide evidence of various actions taken to demonstrate compliance with
134 instructions, e.g. activities, events, investigations, and in the case of manufactured
135 batches a history of each batch of product, including its distribution. Records in-
136 clude the raw data which is used to generate other records. For electronic records
137 regulated users should define which data are to be used as raw data. At least, all
138 data on which quality decisions are based should be defined as raw data.
- 139 Records can also exist as hybrid records which is a combination of paper records,
140 electronic records or by other means. The completeness and integrity of records, in-
141 cluding all relevant raw data and meta data should be ensured and protected based on
142 risk.
- 143 - **Certificate of Analysis:** Provide a summary of testing results on samples of products
144 or materials¹ together with the evaluation for compliance to a stated specification.

¹ Alternatively, the certification may be based, in-whole or in-part, on the assessment of real time data (summar-
ies and exception reports) from batch related process analytical technology (PAT), parameters or metrics as
per the approved marketing authorisation dossier.

- 145 - **Report:** Document the conduct of exercises, studies, assessments, projects or inves-
146 tigations, together with results, conclusions and recommendations.

147 **Specifications**

- 148 4.28. There should be approved and updated specifications for starting and packaging materials,
149 intermediate, bulk, finished products, process aids and other quality critical material, as ap-
150 plicable. Specifications should include all attributes which are relevant for product quality on
151 each stage of material or manufacture.

152 **Specifications for starting and packaging materials**

- 153 4.29. Specifications for starting and primary or printed packaging materials should include the prod-
154 uct and its reference code, if applicable:
- 155 i. A description of the materials, including:
 - 156 • The designated name and the internal code reference.
 - 157 • The reference, if any, to a pharmacopeial monograph.
 - 158 • The approved suppliers and, if applicable, the original producer of the material.
 - 159 • A specimen of printed materials.
 - 160 ii. Directions for sampling and testing.
 - 161 iii. Qualitative and quantitative requirements with acceptance limits.
 - 162 iv. Storage conditions and precautions.
 - 163 v. The maximum period of storage before re-examination.

164 **Specifications for intermediate and bulk products**

- 165 4.30. Specifications for intermediate and bulk products should be available for critical steps or if
166 these are purchased or dispatched. The specifications should be similar to specifications for
167 starting materials or for finished products, as appropriate.

168 **Specifications for finished products**

- 169 4.31. Specifications for finished products should include or provide reference to:
- 170 vi. The designated name of the product and the code reference where applicable.
 - 171 vii. The formula.
 - 172 viii. A description of the pharmaceutical form and package details.
 - 173 ix. Directions for sampling and testing.
 - 174 x. The qualitative and quantitative requirements, with the acceptance limits.
 - 175 xi. The storage conditions and any special handling precautions, where applicable.
 - 176 xii. The shelf-life.
- 177

178 **Manufacturing Formula and Processing Instructions**

- 179 4.32. Approved, written Manufacturing Formula and Processing Instructions should exist for each
180 product and batch size to be manufactured.

- 181 4.33. The Manufacturing Formula should include:

- 182 i. The name of the product, with a product reference code relating to its specification.
- 183 ii. A description of the pharmaceutical form, strength of the product and batch size.
- 184 iii. A list of all starting materials to be used, with the amount of each, described;

185 mention should be made of any substance that may disappear while processing, of
186 processing aids needed or any other material relevant for product quality.

187 iv. A statement of the expected final yield with the acceptable limits, and of relevant in-
188 termediate yields, where applicable.

189 4.34. The Processing Instructions should include:

190 i. A statement of the processing location and the principal equipment to be used.

191 ii. The methods, or reference to the methods, to be used for preparing the critical equip-
192 ment (e.g. cleaning, assembling, calibrating, sterilising).

193 iii. Checks that the equipment and workstation are clear of previous products, docu-
194 ments or materials not required for the planned process, and that equipment is clean
195 and suitable for use.

196 iv. Detailed stepwise processing instructions [e.g. checks on materials, pre-treatments,
197 sequence for adding materials, critical process parameters (time, temp etc)].

198 v. The instructions for any in-process controls with their limits.

199 vi. Where necessary, the requirements for bulk storage of the products; including the
200 container, labelling and special storage conditions where applicable.

201 vii. Any special precautions to be observed.

202 **Packaging Instructions**

203 4.35. Approved Packaging Instructions for each product, pack size and type should exist. These
204 should include, or have a reference to, the following:

205 i. Name of the product; including the batch number of bulk and finished product.

206 ii. Description of its pharmaceutical form, and strength where applicable.

207 iii. The pack size expressed in terms of the number, weight or volume of the product in
208 the final container.

209 iv. A complete list of all the packaging materials required, including quantities, sizes
210 and types, with the code or reference number relating to the specifications of each
211 packaging material.

212 v. Where appropriate, an example or reproduction of the relevant printed packaging
213 materials, and specimens indicating where to apply batch number references, and
214 shelf life of the product.

215 vi. Checks that the equipment and workstation are clear of previous products, docu-
216 ments or materials not required for the planned packaging operations (line clear-
217 ance), and that equipment is clean and suitable for use.

218 vii. Checks on functioning of any electronic code readers, label counters or similar de-
219 vices.

220 viii. Special precautions to be observed, including a careful examination of the area and
221 equipment in order to ascertain the line clearance before operations begin.

222 ix. A description of the packaging operation, including any significant subsidiary opera-
223 tions, and equipment to be used.

224 x. Details of in-process controls with instructions for sampling and acceptance limits.

225 **Batch Processing Record**

226 4.36. A Batch Processing Record should be kept for each batch processed. It should be based on

- 227 the relevant parts of the currently approved Manufacturing Formula and Processing Instruc-
228 tions, and should contain the following information:
- 229 i. The name and batch number of the product.
 - 230 ii. Dates and times of commencement, of significant intermediate stages and of comple-
231 tion of production.
 - 232 iii. Identification (initials) of the operator(s) who performed each significant step of the
233 process and, where appropriate, identification (initials) of the person who checked
234 these operations.
 - 235 iv. The batch number and/or analytical control number as well as the quantities of each
236 starting material weighed (including the batch number and amount of any recovered
237 or reprocessed material added).
 - 238 v. Any relevant processing operation or event and major equipment used.
 - 239 vi. A record of the in-process controls and the initials of the person(s) carrying them
240 out, and the results obtained.
 - 241 vii. The product yield obtained at different and pertinent stages of manufacture.
 - 242 viii. Notes on special problems including details, with signed authorisation for any devia-
243 tion from the Manufacturing Formula and Processing Instructions.
 - 244 ix. Approval by the person responsible for the processing operations.
- 245 **Note:** Where a validated process is continuously monitored and controlled, then automati-
246 cally generated reports may be limited to compliance summaries and exception/ out-of-
247 specification (OOS) data reports.
- 248 With regards to decision making in manufacturing supported by automatic validation scripts
249 or artificial intelligence refer to paragraph 4 of this document.

250 **Batch Packaging Record**

- 251 4.37. A Batch Packaging Record should be kept for each batch or part batch processed. It should be
252 based on the relevant parts of the Packaging Instructions.
- 253 4.38. The batch packaging record should contain the following information:
- 254 i. The name and batch number of the product.
 - 255 ii. The date(s) and times of the packaging operations.
 - 256 iii. Identification (initials) of the operator(s) who performed each significant step of the
257 process and, where appropriate, the name of any person who checked these opera-
258 tions.
 - 259 iv. Records of checks for identity and conformity with the packaging instructions, in-
260 cluding the results of in-process controls.
 - 261 v. Records of checks that the equipment and workstation are clear of previous products,
262 documents or materials not required for the planned packaging operations (line clear-
263 ance), that equipment is clean and suitable for use, and that any electronic code read-
264 ers, label counters or similar devices are functioning as expected.
 - 265 vi. Details of the packaging operations carried out, including references to equipment
266 and the packaging lines used.
 - 267 vii. Whenever possible, samples of printed packaging materials used, including speci-
268 mens of the batch coding, expiry dating and any additional overprinting.
 - 269 viii. Notes on any special problems or unusual events including details, with signed

- 270 authorisation for any deviation from the Packaging Instructions.
- 271 ix. The quantities and reference number or identification of all printed packaging mate-
272 rials and bulk product issued, used, destroyed or returned to stock and the quantities
273 of obtained product, to provide for an adequate reconciliation. Where there are vali-
274 dated electronic controls in place during packaging there may be justification for not
275 including this information
- 276 x. Approval by the person responsible for the packaging operations.

277 **Receipt**

- 278 4.39. There should be written procedures and records for the receipt of each delivery of each starting
279 material, (including bulk, intermediate or finished goods), primary, secondary and printed
280 packaging materials and QC-samples. The records of the receipts should include:
- 281 i. The name of the material on the delivery notes and the containers.
- 282 ii. The "in-house" name and/or code of material (if different from a).
- 283 iii. Date of receipt.
- 284 iv. Supplier's name and, manufacturer's name.
- 285 v. Manufacturer's batch or reference number.
- 286 vi. Total quantity and number of containers received.
- 287 vii. The batch number assigned after receipt.
- 288 viii. Any relevant comment.
- 289 ix. If applicable, proof of verification that temperature during transportation were within
290 the approved limit.
- 291 4.40. There should be written procedures for the internal labelling, quarantine and storage of start-
292 ing materials, packaging materials, QC samples and other materials, as appropriate.

293 **Sampling**

- 294 4.41. There should be written procedures for sampling, which include the methods and equipment
295 to be used, the amounts to be taken and any precautions to be observed to avoid contamination
296 of the material or any deterioration in its quality (reference to EU GMP Guideline Volume 4,
297 Chapter 6 "Quality Control").

298 **Testing**

- 299 4.42. There should be written procedures for testing materials and products at different stages of
300 manufacture, describing the methods and equipment to be used. The tests performed should
301 be recorded (reference to EU GMP Guideline Volume 4, Chapter 6 "Quality Control").

302 **Other**

- 303 4.43. Written release and rejection procedures should be available for materials and products, and
304 in particular for the certification for sale of the finished product by the Qualified Person(s).
305 All records should be available to the Qualified Person at the time of the release decision. A
306 system should be in place to indicate special observations and any changes to critical data.
- 307 4.44. Records should be maintained for the distribution of each batch of a product in order to facil-
308 itate recall of any batch, if necessary.
- 309 4.45. There should be written policies, procedures, protocols, reports and the associated records of
310 actions taken, or conclusions reached, where appropriate, for GMP relevant actions, including

- 311 but not limited to the following examples:
- 312 i. Validation and qualification of processes, equipment and systems.
 - 313 ii. Equipment assembly and calibration.
 - 314 iii. Data integrity.
 - 315 iv. Technology transfer.
 - 316 v. Maintenance, cleaning and sanitation.
 - 317 vi. Personnel matters including signature lists, training in GMP and technical matters,
 - 318 clothing and hygiene and verification of the effectiveness of training.
 - 319 vii. Environmental monitoring.
 - 320 viii. Pest control.
 - 321 ix. Complaints.
 - 322 x. Recalls.
 - 323 xi. Returns.
 - 324 xii. Change control.
 - 325 xiii. Investigations into deviations.
 - 326 xiv. non-conformances e.g. out of specifications.
 - 327 xv. Internal quality/GMP compliance audits.
 - 328 xvi. Summaries of records where appropriate (e.g. product quality review).
 - 329 xvii. Supplier audits.
- 330 4.46. Clear operating procedures should be available for major items of manufacturing and test
331 equipment.
- 332 4.47. Logbooks should be kept for major or critical analytical testing, production equipment, and
333 areas where product has been processed or handled. They should be used to record in chron-
334 ological order, as appropriate, any use of the area, equipment/method, calibrations, mainte-
335 nance, cleaning or repair operations, including the dates and identity of people who carried
336 these operations out.
- 337 4.48. An inventory of documents within the pharmaceutical quality system should be maintained.

338 **GENERATION AND CONTROL OF DOCUMENTATION**

- 339 4.49. All types of documents (instructions and/or records) should be defined and adhered to
340 regardless of the documentation technology, hybrid solution or service. The technol-
341 ogy, hybrid solution or provided service needs to be understood regardless of com-
342 plexity, should be adequately documented, and validated with risk-based controls in
343 place. Relationships and control measures for master documents, official copies, data
344 handling and records need to be defined for both hybrid and homogenous systems
345 regardless of the type of service. Appropriate controls for documents should be im-
346 plemented to ensure the completeness, integrity and legibility of the records through-
347 out the lifecycle.
- 348 4.50. Documents should be designed, prepared, reviewed, and distributed in a controlled
349 manner. They should comply with the relevant parts of Product Specification Files,
350 Manufacturing and Marketing Authorisation dossiers, or dossiers of Investigational
351 Medicinal Products, as appropriate. The reproduction of working documents from
352 master documents should not allow any error or alteration to be introduced through

- 353 the reproduction process.
- 354 4.51. Documents should be regularly reviewed and kept up to date. Documents should be
355 approved, signed, and dated by appropriate and authorised personnel. Documents
356 should have unambiguous contents and be uniquely identifiable. The effective date
357 should be defined.
- 358 4.52. Documents containing instructions should be laid out in an orderly fashion and be
359 easy to review. The style and language of documents should fit with their intended
360 use. Standard operating procedures, work instructions and methods should be written
361 in an imperative mandatory style by using predefined format. Data entry formats for
362 completion of documents should be clearly defined. Written instructions may be sup-
363 ported with pictures, photos or videos. The documents containing the instructions
364 should be easily accessible at the place where the described activities are carried out.
- 365 4.53. Instructions and procedures within the Quality Management System should be regu-
366 larly reviewed and kept updated.
- 367 4.54. The issuance, revision, superseding and withdrawal of all documents should be con-
368 trolled with maintenance of revision histories.
- 369 4.55. Hand-written instructions are discouraged. Where documents require the manual entry
370 of data, sufficient space should be provided for such entries to ensure adequately clear
371 and legible manual recording.

372 **GOOD DOCUMENTATION PRACTICE**

- 373 4.56. Good Documentation practices are key to ensuring data integrity, and a fundamental
374 part of a well-designed pharmaceutical quality system.
- 375 4.57. Procedures outlining good documentation practices and arrangements for document
376 control should be available within the pharmaceutical quality system. Good documen-
377 tation practices should be implemented and enforced to ensure data integrity.
- 378 4.58. Data entries should be accurate, and made in clear, legible, indelible way. Recorded
379 media should be durable throughout the retention period. If this is not feasible, then
380 true copies should be generated. For this case a documented system should be in place
381 to verify and record the integrity of the copy.
- 382 4.59. Records should be made or completed at the time each action is taken and in such a
383 way that all GMP activities are traceable. It should be possible to identify the individ-
384 ual or the system that performed the task and when the task was performed.
- 385 4.60. Any alteration made to the entry on a document should be signed by the individual
386 who made the change and dated; the alteration should permit the reading of the origi-
387 nal information. Where appropriate, the reason for the alteration should be recorded.
- 388 4.61. Records need to be a truthful and consistent representation of facts to ensure the ac-
389 curacy of information, including data that is used to make critical decisions about the
390 quality of products.
- 391 4.62. Specific controls should be implemented to ensure the integrity of raw data and results
392 recorded on paper. These may include, but are not limited to:
- 393 i. control over the issuance and use of loose paper sheets (blank forms) at the time of
394 recording data.
 - 395 ii. control over the issuance of bound, paginated notebooks.
 - 396 iii. control over the issuance and reconciliation of sequentially numbered copies of

397 blank forms with authenticity controls.

398 iv. Control that raw data is contemporaneously and accurately recorded by permanent
399 means.

400 4.63. Basic data integrity principles (table 1) applicable to both paper and electronic systems
401 (i.e. ALCOA ++):
402
403

Table 1: Data integrity principles

Attributes	Requirement
Attributable	It should be possible to identify the individual or computerised system that performed a recorded task and when the task was performed. This also applies to any changes made to records, such as corrections, deletions, and changes where it is important to know who made a change, when, and why.
Legible	All records should be legible – the information should be readable and unambiguous in order to be understandable and of use. This applies to all information that would be required to be considered complete, including all original records or entries. Where the ‘dynamic’ nature of electronic data (the ability to search, query, trend, etc.) is important to the content and meaning of the record, the ability to interact with the data using a suitable application is important to the ‘availability’ of the record.
Contemporaneous	The evidence of actions, events or decisions should be recorded as they take place. This documentation should serve as an accurate attestation of what was done, or what was decided and why, i.e. what influenced the decision at that time.
Original	The original record can be described as the first capture of information, whether recorded on paper (static) or electronically (usually dynamic, depending on the complexity of the system). Information that is originally captured in a dynamic state should remain available in that state.
Accurate	Records need to be a truthful representation of facts to be accurate. Ensuring records are accurate is achieved through many elements of a robust pharmaceutical quality system. This can be comprised of: <ul style="list-style-type: none">• equipment related factors such as qualification, calibration, maintenance, and computer validation.• policies and procedures to control actions and behaviours, including data review procedures to verify adherence to procedural requirements.

	<ul style="list-style-type: none"> • deviation management including root cause analysis, impact assessments and CAPA. • trained and qualified personnel who understand the importance of following established procedures and documenting their actions and decisions. <p>Together, these elements aim to ensure the accuracy of information, including scientific data that is used to make critical decisions about the quality of products.</p>
Complete	All information that would be critical to recreating an event is important when trying to understand the event. It is important that information is not lost or deleted. The level of detail required for an information set to be considered complete would depend on the criticality of the information. A complete record of data generated electronically includes relevant metadata.
Consistent	Information should be created, processed, and stored in a logical manner that has a defined consistency. This includes policies or procedures that help control or standardize data (e.g. chronological sequencing, date formats, units of measurement, approaches to rounding, significant digits, etc.).
Enduring	Records should be kept in a manner such that they exist for the entire period during which they might be needed. This means they need to remain intact and accessible as an indelible/durable record throughout the record retention period.
Available	Records should be available for review at any time during the required retention period, accessible in a readable format to all applicable personnel who are responsible for their review whether for routine release decisions, investigations, trending, annual reports, audits or inspections.
Traceable	Traceability is the ability to trace the history, modification or location of data by means of recorded identifications.

404

405 **SIGNATURES IN GMP RELEVANT DOCUMENTATION**

406 4.64. Signatures are essential for ensuring accountability for activities in a GMP environ-
407 nment at the time points the signatures are executed.

408 4.65. A signature represents the legally binding will of the signatory. The signatory should
409 sign with date and time. If signatures by initials are in use a procedure defining abbrevi-
410 ated signatures should be in place.

- 411 4.66. The identification of the signatory should be possible. Data or documents which are
412 associated with the signature should be clearly identified. The meaning of the signa-
413 ture (such as review, approval, responsibility, or authorship) associated with the sig-
414 nature should be clear.
- 415 4.67. The regulated user should establish a signature policy to ensure the adequate applica-
416 tion of signatures. Personnel authorised to sign should be clearly identified by name
417 and bound by name to the signature policy.
- 418 4.68. The regulated user should have identified those records which require a legally bind-
419 ing signature.
- 420 4.69. Signatures should be indisputable and traceable to the signatory and the signed docu-
421 ment or record, regardless, if a signature is applied on paper or electronically.
- 422 4.70. If records exist electronically such records should be signed electronically. The use of
423 a hybrid system should be avoided. If signatures exist parallel in paper and electroni-
424 cally (e.g. in hybrid systems), the regulatory relevant signature should be defined by
425 the regulated user.
- 426 4.71. The signatory should be qualified and authorised to perform the relevant tasks or re-
427 views.
- 428 4.72. The regulated user should define the signatory's role and responsibility in the signa-
429 tion process.
- 430 4.73. The regulated user should ensure that the signatory's role and qualification is con-
431 sistent with the meaning (intent) of a signature.
- 432 4.74. To ensure the integrity of signatures during the whole life cycle of data the regulated
433 user should establish the management and control of signatures as an element of a data
434 governance system.
- 435 4.75. The data or documents which the signature is relevant for should fulfil the ALCOA++
436 principles.
437

438 **RETENTION OF DOCUMENTS**

- 439 4.76. It should be clearly defined which record is related to each activity and where this
440 record is located, regardless of the technology, hybrid solution or service used. Risk-
441 based control methods should be in place to ensure the integrity of the record through-
442 out the lifecycle. The control measures should be covered by the validation scope. In
443 case of electronic recording such measures should include back-up, restore and ar-
444 chiving procedures as well as physical and logical controls. If the regulated user relies
445 on hosted services, it is the responsibility of the regulated user to understand, approve
446 and justify the control measures of the hosted service provider based on a service level
447 agreement. Records should be available for review at any time during the required
448 retention period, accessible in a human readable format to all applicable personnel.
- 449 4.77. Specific requirements apply to batch documentation which must be kept for one year
450 after expiry of the batch to which it relates or at least five years after certification of
451 the batch by the Qualified Person, whichever is the longer. For investigational medic-
452 inal products, the batch documentation must be kept for at least five years after the
453 completion or formal discontinuation of the last clinical trial in which the batch was
454 used. Other requirements for retention of documentation may be described in legisla-
455 tion in relation to specific types of products (e.g. Advanced Therapy Medicinal

456 Products and products derived from human blood or human plasma) and specify that
457 longer retention periods be applied to certain documents.

458 4.78. For other types of documentation, the retention period will depend on the business
459 activity which the documentation supports. Critical documentation, including raw
460 data (for example relating to validation or stability), which supports information in the
461 Marketing Authorisation should be retained whilst the authorization remains in force.
462 It may be considered acceptable to retire certain documentation (e.g. raw data sup-
463 porting validation reports or stability reports) where the data has been superseded by
464 a full set of new data. Justification for this should be documented and should consider
465 the requirements for retention of batch documentation; for example, in the case of
466 process validation data, the accompanying raw data should be retained for a period at
467 least as long as the records for all batches whose release has been supported on the
468 basis of that validation exercise.

469 4.79. A documented process for the disposal of records should be in place to ensure that the
470 correct original records or true copies are disposed only after the defined retention
471 period. Measures should be in place to reduce the risk of deleting the wrong docu-
472 ments. The access rights allowing disposal of records should be controlled.

473 **DATA INTEGRITY IN DOCUMENTATION**

474 4.80. The method of documentation should be integrated in the regulated user's pharmaceu-
475 tical quality system. Documents or records should be controlled in a risk-based ap-
476 proach regardless of whether located in-house or in the form of hosted services. The
477 regulated user should apply the principles of data integrity, data criticality and data
478 risk within a data governance system and should consider the complete lifecycle of
479 data. The data governance system should be an element of the pharmaceutical quality
480 system. The ownership of data and the responsibility for data integrity should be de-
481 fined.

482 4.81. Risk based control measures should be commensurate with the type and the complex-
483 ity of a system. The pharmaceutical quality system should interface with independent
484 review practices to detect risks to data integrity. Risks from human factors should be
485 considered for effectively ensuring data integrity Risk-reducing measures such as sec-
486 ond person oversight, verification and checks should be implemented where appropri-
487 ate and in the appropriate time to ensure critical process and testing steps are accu-
488 rately and contemporaneously recorded.

489 **HYBRID SYSTEMS**

490 4.82. They should be clearly defined and identified, and each contributing element of the
491 system validated and controlled according to risk management principles.

492 4.83. A detailed description of the entire system should be available. The description should
493 outline all major components, their functions, and interactions with each other as well
494 as control for data management and data integrity. Procedures and records should be
495 available to manage and appropriately control the interface between manual and com-
496 puterised systems.

497 4.84. Appropriate quality risk management principles should be followed when assessing,
498 defining, and demonstrating the effectiveness of control measures applied to the sys-
499 tem.

500 4.85. Procedures should be in place to manage the review of data generated by hybrid

501 systems which clearly outline the process for the evaluation, approval and archiving
502 of electronic and paper-based data.

503 GLOSSARY

504 ALCOA++ An acronym for “attributable, legible, contemporaneous, original and accu-
505 rate”, which puts additional emphasis on the attributes complete, consistent,
506 enduring, available and traceable – implicit basic ALCOA principles.

507 Archiving Long term, or permanent retention of completed documentation and relevant
508 metadata in its final form for the purposes of reconstruction of a process or
509 activity.

510 Automated script A piece of code used to automate repetitive processes

511 Data The contents of the record. Data may be defined as measurable or descriptive
512 attribute of a physical entity, process, or event.

513 Data governance The total sum of arrangements to ensure that data, irrespective of the format in
514 which it is generated, recorded, processed, retained and used, will be attribut-
515 able, legible, contemporaneous, original, accurate, complete, consistent, en-
516 during, and available throughout the data lifecycle.

517 Data integrity Data integrity refers to the completeness, consistency, and accuracy of data.
518 Complete, consistent, and accurate data should be attributable, legible, con-
519 temporaneously recorded, original or a true copy, accurate and traceable (AL-
520 COA++).

521 Data lifecycle All processes related to the creating, recording, processing, reviewing, chang-
522 ing, analysing, reporting, transferring, storing, migrating, archiving, retrieving,
523 and deleting of data.

524 Data management The set of all methodological, conceptual, organisational and technical
525 measures and procedures for handling data with the aim of incorporating it into
526 business processes.

527 Data risk The combination of the probability of occurrence of harm and the severity of
528 that harm related to data (incompleteness, alterations or loss which compro-
529 mise the integrity of data).

530 Data criticality The degree of influence that data have on product safety as well as the regula-
531 tory compliance of processes, decisions and product quality.

532 Data Risk Management An activity to be applied throughout the lifecycle of data considering the need
533 to ensure data integrity. Risk management consists of risk identification, risk
534 assessment, risk mitigation and risk control. Risk management should link to
535 other relevant procedures (e.g. configuration and change management, man-
536 agement processes for data, business risks, etc.).

537 Data Risk Assessment The process of evaluating the risks associated with the regulated user’s data. It
538 ensures an efficient and effective approach to data integrity by considering the
539 vulnerability of data to involuntary or deliberate alteration resulting in risk-
540 based control measures.

541	Data ownership	The allocation of responsibilities for control of data to a specific process
542		owner. Companies should implement systems to ensure that responsibilities for
543		systems and their data are appropriately allocated, and responsibilities under-
544		taken.
545	Data quality	The degree to which a set of inherent characteristics (quality dimensions) of
546		data fulfils requirements.
547		Data should be fit for use in their intended operational, decision-making, and
548		other roles and should exhibit conformance to regulatory standards that have
549		been set, so that fitness for use is achieved.
550	Document	A formatted compilation of data. Operations and activities that are memorial-
551		ized in (electronic) records may consist of one or more documents that describe
552		the activity in a moment of time.
553	Electronic record	Any combination of text, graphics, data, audio, pictorial, or other information
554		representation in digital form that is created, modified, maintained, archived,
555		retrieved, or distributed by a computer system.
556	Hybrid system	A combination of paper based and electronic means.
557	Homogenous systems	A system that is either paper or electronically based on-premises or a cloud
558		service.
559	Meta data	Describe the attributes of data and provides context and meaning. Metadata is
560		any information used for the identification, description, and relationships of
561		electronic records or their elements. Metadata gives data meaning, provides
562		context, defines structure, and enables retrievability across systems, and usa-
563		bility, authenticity, and auditability across time.
564	Raw Data	Raw data is defined as the original record (data) which can be described as the
565		first capture of stored information, whether recorded on paper or electronically.
566		Information that is originally captured in a dynamic state should remain avail-
567		able in that state.
568	Record	Memorializes, or makes information permanent about, an action, activity and
569		event that caused its creation.
570	Regulated user	Marketing Authorisation Holder, Manufacturers, control laboratories, import-
571		ers, and wholesale distributors (if the wholesale distributor holds a manufac-
572		turing license).
573	Risk based approach for data integrity	
574		A process to define critical data, documents and the actions used to monitor
575		activities like capturing, derivation, migration, storage, communication and ar-
576		chiving to ensure that data and documents remain in a state of control through-
577		out the entire lifecycle and to maintain its integrity.
578	Specification	A list of tests, references to analytical procedures, and appropriate acceptance
579		criteria that are numerical limits, ranges, or other criteria for the test described.
580		It establishes the set of criteria to which a material should conform to be con-
581		sidered acceptable for its intended use. "Conformance to specification" means
582		that the material, when tested according to the listed analytical procedures, will
583		meet the listed acceptance criteria.

584	True copy	An exact copy of original documentation that preserves the same content,
585		meaning and attributes of the original. The term “true copy” is synonymous
586		with “certified” or “verified copy”.
587	Type of service	On-premises IT service or outsourced hosted (cloud) IT service
588	Verified copy	Refer to definition of true copy
589	Data Risk Assessment	The process of evaluating the risks associated with the regulated user’s data.