

FREQUENTLY ASKED QUESTIONS: STANDARDS FOR IMMUNE EFFECTOR CELLS

1. Where can we find these Standards?

The Standards are available on the FACT website. A stand-alone document for Immune Effector Cell–specific Standards is available, entitled *FACT Standards for Immune Effector Cells* (first edition). In addition, the requirements have been incorporated into the sixth edition *FACT-JACIE International Standards for Hematopoietic Cellular Therapy Product Collection, Processing, and Administration* (version 6.1), which is also available on the FACT website. A list of the new standards is included as an appendix for reference.

2. Do the proposed Standards cover DLI?

Donor lymphocytes for infusion (DLI) are already included in the *FACT-JACIE International Standards for Hematopoietic Cellular Therapy Product Collection, Processing, and Administration*. These cells will continue to be included within the scope of these Hematopoietic Cell Standards.

3. We do not currently administer immune effector cells on our transplant unit. How does this affect our program?

If you are not utilizing any immune effector cell products, these standards do not apply to the transplant program, and you can check your compliance application as “NA” (not applicable) for the new standards. These products are, however, becoming more common. If your hematopoietic cellular therapy (HCT) transplant program begins using immune effector cells, you must be in compliance with these standards as part of starting the new activity.

4. How do we know if our FACT-accredited Clinical Program must comply with the immune effector cell requirements if we work in conjunction with a non-accredited service?

Generally, any care provided to patients within the HCT transplant program must comply with these standards. This includes administration of these products on your inpatient unit, in your outpatient facility, or under the supervision of your transplant attending physicians. Several different models of care have been adopted by institutions with a FACT-accredited HCT transplant program. FACT does not dictate how an immune effector cell program must be organized or managed, and it is impractical to list every possible scenario and how the new standards apply. For specific questions about your program’s responsibility to meet the new standards, contact the FACT office at 1-402-559-1950 or fact@unmc.edu.

5. Our institution’s separate leukemia, lymphoma, or hematology/oncology services administer immune effector cells and want to become FACT-accredited. May we share our accreditation?

FACT will apply its long-standing eligibility requirements for Clinical Programs to immune effector cell programs. To share an accreditation, clinical services must have shared leadership, quality management programs, and staff training protocols; and demonstrate regular interaction. Contact the FACT office for more guidance if needed.

6. Do these Standards apply to the collection of mononuclear cells by apheresis?

The Standards for Immune Effector Cells do include a section on cellular therapy product collection by apheresis. All standards in this section are also included in the sixth edition *FACT-JACIE International Standards for Hematopoietic Cellular Therapy Product Collection, Processing, and Administration*. Therefore, if you are utilizing a FACT-accredited Apheresis Collection Facility for collection of cells for further manufacture into immune effector cells, ensure your collection processes for immune effector cells are in compliance with the FACT-JACIE Standards. If you are utilizing an apheresis service that is not currently FACT-accredited, that service must also meet the Standards for Immune Effector Cells.

7. We collect mononuclear cells by apheresis for further manufacturing by a third-party company. These donors do not always have infectious disease testing results within the prescribed time frame. How can we manage this?

Manufacturing of these products, including the donor testing for communicable diseases, is governed by an approved IND. If the IND requirements differ from the SOPs of your collection facility, it is expected that the IND will be followed and that the Apheresis Collection Facility Quality Management Plan should define the processes to follow when collections are non-compliant with the usual standards.

8. We manufacture our own immune effector cells in our FACT-accredited Cell Processing Facility under IND. Do these Standards apply?

The clinical standards apply regardless where the cell manufacturing occurs.

It has been recommended that an accredited cell processing laboratory that is involved in the manufacture of products under IND also seek accreditation by FACT for the “more than minimal manipulation” activities, which would include immune effector cell products. With the next accreditation renewal of the Cell Processing Facility, accreditation for “more than minimal manipulation” will be required if these cells are being manufactured in that facility. The Standards that apply to these activities are already included in Section D Processing Facility Standards of the sixth edition FACT-JACIE Standards.

9. We obtain immune effector cells for administration in our accredited transplant unit from a GMP laboratory on our campus that is not related to our usual FACT-accredited Cell Processing Facility. What standards apply to this situation?

The clinical standards apply regardless where the cell manufacturing occurs.

The GMP laboratory may already be FACT-accredited under the first edition *FACT Common Standards for Cellular Therapies*. This accreditation is sufficient. In the future, that laboratory may continue its accreditation under the Common Standards, or may choose to be accredited under the Immune Effector Cell Standards, depending on the scope of the activities performed.

If the GMP laboratory is not FACT accredited, it is recommended that steps be taken as soon as possible to ensure the laboratory meets the standards in section D of the Immune Effector Cell Standards. Accreditation requirements for the laboratory will be phased in with the renewal cycle of the Clinical Program.

10. Does our clinical program need to be reinspected to be accredited for immune effector cells?

FACT-accredited HCT Clinical Programs are expected to be in compliance with these new Standards within 30 days of publication if they are using immune effector cell products (March 1, 2017). Reporting of this activity and documentation of compliance will occur at the next annual report or regularly scheduled on-site inspection, whichever is first.

For clinical units that are not FACT-accredited, such as oncology or leukemia programs that are separate from the HCT transplant service or non-FACT accredited transplant units, a complete on-site inspection under the new Immune Effector Cell Standards will be required to achieve accreditation. There is no reciprocity for clinical unit accreditation by an accrediting body other than FACT. This on-site inspection will include apheresis unless a FACT-accredited Apheresis Collection Facility is being utilized. It will also include the Processing Facility if the immune effector cells are manufactured on-site by a laboratory that is not FACT-accredited for more than minimal manipulation.

11. Who will perform the on-site inspections for Immune Effector Cell Programs?

As with all FACT on-site inspections, the volunteer inspectors will be experts in the field, active in the area they inspect, and specifically trained in FACT Standards and accreditation requirements. All clinical inspectors are physicians. Training modules related to immune effector cells will be added to the requirements for current FACT clinical inspectors. Those physicians involved with immune effector cells who are not part of a transplant program or who have never been FACT clinical inspectors will be trained in aspects of FACT Standards and Accreditation needed to fulfill this responsibility, and in the modules specific to immune effector cells.

There is already a group of FACT laboratory inspectors who are trained and experienced in the inspection of laboratories for “more than minimal manipulation” processes, including manufacturing of immune effector cells and other products under IND. Additional persons with this expertise will be sought for this program.

12. How do we apply to become FACT-accredited?

You should apply to become FACT-accredited when you are confident that you meet each of the Standards. The first step is to obtain the *FACT Standards for Immune Effector Cells*, available on the FACT website. Materials will be available there to instruct you in submission of the Eligibility Application that describes your program, and the Compliance Application that documents your compliance with all standards.