



Medicines & Healthcare products  
Regulatory Agency



# **INSPECTION REPORT**

**Reckitt Benckiser Healthcare (UK) Ltd**  
Dansom Lane  
Hull  
HU8 7DS

**Head Office:**  
**Inspection, Enforcement & Standards Division, MHRA**  
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## Section A Inspection Report Summary

Inspection requested by: MHRA Scope of Inspection: Routine Re-Inspection Licence or  
Reference Number: MIA / API 63

Licence Holder/Applicant: Reckitt Benckiser Healthcare (UK) Ltd

Details of Products/Clinical trials: Manufacture and importation of licensed medicines.  
Importation of APIs.

| Activities carried out by company:                                | Y/N |
|---|-----|
| Manufacture of Active Ingredients                                 | N   |
| Manufacture of Finished Medicinal Products – Non-sterile          | Y   |
| Manufacture of Finished Medicinal Products - Sterile              | N   |
| Manufacture of Finished Medicinal Products - Biologicals          | N   |
| Manufacture of Intermediate or Bulk                               | Y   |
| Packaging – Primary   | Y   |
| Packaging - Secondary   | Y   |
| Importing   | Y   |
| Laboratory Testing  | Y   |
| Batch Certification and Batch Release                             | Y   |
| Sterilisation of excipient, active substance or medicinal product | N   |
| Broker  | N   |
| Other:  | N   |

Name and Address of sites inspected (if different to cover):

Site Contact: [REDACTED]

Dates of Inspection: 26-29 Feb 2024 Lead Inspector: [REDACTED]  
Accompanying Inspector: [REDACTED] Case Folder References: Insp GMP 63/17093-0051

## Section D List of Deficiencies

D1 Critical

None

D2 Major

|   |                           |                |
|---|---------------------------|----------------|
| GMP/IMP Inspection of Reckitt Benckiser<br>Healthcare (UK) Ltd, Dansom Lane, Hull HU8 7DS | MHRA<br>GMP 63/17093-0051 | PAGE<br>3 of 4 |
|---|---------------------------|----------------|

None

### D3 Others

3.1 Cleaning processes and the associated records were deficient, in that:

3.1.1 The described cleaning processes did not always reflect the actual processes used. For example, the manual cleaning form [REDACTED] or the [REDACTED] bulk manufacturing area described an initial clean using hot potable water, followed by a second clean using purified water. It was stated that the actual process only used purified water.

3.1.2 Cleaning records did not always provide suitable evidence that the instructions had been followed. For example, form [REDACTED] specified the use of [REDACTED] but there was no documented evidence that these volumes and times had been adhered to.

3.1.3 Logbook entries for the [REDACTED] washer in the washbay were lacking in detail, for example:

3.1.3.1 Although there was only one pre-set wash program used, the recorded start and end times were inconsistent, and appeared to indicate that some cycles took less than 2 hours, and others took several hours. In addition, the use of the 24-hour clock to record timings was inconsistently applied.

3.1.3.2 It was not possible to determine which individual items of equipment had been cleaned on any given wash cycle.

3.1.3.3 Several wash cycle entries were annotated with a comment that the cycle had failed, including 4 out of 6 consecutive cycles from 18th to 20th Dec 2023. It was unclear from the records whether the affected equipment was recleaned. The failed cycles were not formally escalated until 1st Feb 2024.

**Reference: EU GMP 1.8 (vi), 3.36, 4.5, 4.8**

3.2 Storage of materials was deficient in that:

3.2.1 Temperature data in the warehouse was not consistently provided and checked in a way that ensured the required storage conditions were maintained. For example, the temperature of the dispatch area was reviewed as the average of 5 different temperature sensors in 5 different locations which did not ensure that all individual locations had maintained conditions within specification.

3.2.2 QC samples were not consistently managed in a manner to protect them from adverse storage conditions. For example, some samples were stored in very close proximity to an oven at more than 100°C with no confirmation that they remained within the required storage conditions (under 25°C).

3.2.3 QC working standards were not robustly established as fit to use. For example, there was no data to support the proposed expiry date.

**Reference: EU GMP 3.19, 6.13, 6.20**

3.3 Deviation management was deficient, as evidenced by:

3.3.1 [REDACTED] did not clearly explain why the deviation was only raised on 2 Jan 2024 when the issue occurred on 9 Dec 2023.

3.3.2 [REDACTED] indicated a probable cause of routine batch-to-batch cleaning activities not being adhered to, however there was no documented investigation as to why the procedures had not been followed.

**Reference: EU GMP 1.4 (xiv), 1.8 (vii)**

3.4 The stability programme was deficient, in that:

3.4.1 During 2021, [REDACTED] were manufactured however no batches had been added to the ongoing stability programme.

|   |                           |                |
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| GMP/IMP Inspection of Reckitt Benckiser<br>Healthcare (UK) Ltd, Dansom Lane, Hull HU8 7DS | MHRA<br>GMP 63/17093-0051 | PAGE<br>4 of 4 |
|---|---------------------------|----------------|

3.4.2 Change control [REDACTED] (Jun 2023) for the discontinuation of [REDACTED] incorrectly stated that no batches were required to be added to the ongoing stability programme because no batches had been manufactured since 2020.

*Reference: EU GMP 6.32*

3.5 Equipment qualification was deficient, in that:

3.5.1 The stated line speeds and bottle blower air pressure ranges for the various filling lines did not always appear to be supported by validation data. For example, the 100ml and 200ml bottle sizes on the [REDACTED] line.

3.5.2 Qualification protocols from third party service providers were not consistently provided to the site to confirm suitability and compliance. For example, the most recent qualification of [REDACTED] [REDACTED] (Mar 2023) was limited to results only and did not include the qualification protocol or the pre-defined acceptance criteria.

*Reference: EU GMP 6.7 (iii), Annex 15 (2.6, 7.2)*

3.6 Sampling of starting materials was deficient, in that:

3.6.1 The sampling area for active ingredients and excipients located in the warehouse presented some interior surfaces that were not smooth or free from cracks to permit easy and effective cleaning.

*Reference: EU GMP 3.9, 3.22*

3.7 The complaints procedure included obsolete contact details for MHRA.

*Reference: EU GMP 4.5*

3.8 Actions arising from the quality management review meetings were only captured in the meeting minutes and were not formally raised as CAPAs within the PQS, thereby potentially limiting the effectiveness of sitewide monitoring controls.

*Reference: EU GMP 1.4 (viii)*

#### **D4 Comments**

4.1 Please notify the inspectors when you submit the variation [REDACTED] from the MIA.