



# **2022 Program Directors Assembly Business Meeting April 7, 2022**

**Joseph Yusin MD  
Chair, Review Committee for Allergy and Immunology**

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## **Conflict of Interest Disclosure**

- No conflicts of interest to report



## ACGME RC-Allergy and Immunology Staff

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## Mission Statement

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The mission of the ACGME is to improve health care and population health by assessing and enhancing the quality of resident and fellow physicians' education through advancements in accreditation and education.



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## Differences Between the ACGME and the Certifying Boards



## RC for Allergy and Immunology Members

- Joseph S. Yusin, MD\* (*Chair*)
- Kelly D. Stone, MD (*Vice Chair*)
- Andrea Apter, MD
- Thomas Prescott Atkinson, MD\*
- Paul J. Dowling, MD
- Lisa Kobrynski, MD
- Kathleen R. May, MD
- Brittanie Neaves, MD\* (*Resident Member*)
- Diane Neefe, MS (*Public Member*)
- Michael Nelson, MD (*Ex-officio ABAI*)
- Princess Ogbogu, MD

\*Term ends June 30, 2022

RC members are not allowed to discuss RC activities, accreditation decisions



## **RC for Allergy and Immunology Members**

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- Kelly D. Stone, MD – Chair
- Kathleen R. May, MD – Vice Chair

Effective: July 1, 2022



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## **Incoming RC-A&I Members**

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- Theresa Bingemann, MD
  - University of Rochester, Rochester, NY
- Omar Elsayed-Ali, MD (Resident Member)
  - Washington University, St. Louis, MO
- Rebecca Scherzer, MD
  - Nationwide Children's Hospital, Columbus, OH

Terms begin: July 1, 2022



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## Allergy and Immunology Program Accreditation Academic Year 2021-2022

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### Academic Year 2021-2022

- Total Programs: 84




## Upcoming RC Meeting Dates Allergy and Immunology


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Meeting Dates:	Agenda Closing Date:
March 24, 2022	January 7, 2022
January 5-6, 2023	October 7, 2022
March 23, 2023	January 6, 2023



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Home > Specialties > Allergy and Immunology

## Allergy and Immunology

### Program Requirements and FAQs

Currently in Effect

FAQ documents are being updated to correspond to the 2020 specialty-specific Program Requirements. Announcements will be made in the ACGME's weekly e-Communication when revised FAQ documents are available. Please contact a member of the

- Overview >>
- Program Requirements and FAQs and Applications ○
- Milestones >>
- Documents and Resources >>

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# Common Program Requirement (CPR) Major Revision

**Section VI:** effective July 1, 2017

**Sections I-V:** effective July 1, 2019 and July 1, 2020

- All specialty/subspecialty Program Requirements have been incorporated into the new Common Program Requirement format and are now available



## Dedicated Time

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- Program Directors and Associate Program Directors
- Program Coordinators
- Core Faculty



## Board Actions

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- In June 2020, the Board approved the formation of a special task force to create a set of standards that would guide the creation of programs and the requirements for accreditation and fee structures. The task force is based on unique needs of different specialties with responsibility to maintain equality standards.
- Decisions regarding the distribution of resources among specialties and ensuring equity in the distribution of resources.



# Guiding Principles

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Goal:  
Sufficient time to engage in  
education, supervision,  
evaluation and mentoring of  
trainees

Unique characteristics  
of specialty, and  
institution

Minimum requirements  
needed



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# Board Actions

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- Task Force comprised of representatives of the ACGME Board and ACGME leadership reviewed:
  - **more than 100** position papers submitted by representatives from **more than 200** organizations across the medical community
  - data collected from the ACGME's Accreditation Data System
  - a comprehensive literature search
  - oral testimony from **more than 100** internal and external stakeholders



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# Implementation

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- Goal: balance the unique needs of each specialty/subspecialty with the responsibility to maintain fair and *equitable standards across specialties/subspecialties*.
- In **February 2021**, the ACGME Board directed the Committee on Requirements to create a **toolkit** using these guiding principles for Review Committees to use in developing specialty-specific requirements related to dedicated time for program directors, program coordinators, and core faculty members.



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# Board Actions

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- In **June 2021**, the ACGME Board approved focused revisions to Section II of the Common Program Requirements related to dedicated time for program directors, assistant/associate program directors, program coordinators, and core faculty members.
  - Posted for a 45-day public comment period in February 2021 and **now approved with an effective date of July 1, 2022.**



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REVIEW COMMITTEE UPDATE

MARCH 9, 2022

Dear Allergy and Immunology Designated Institutional Officials, Program Directors, and Program Coordinators:

In February 2022, the ACGME Board of Directors approved a revision to the Program Requirements for Allergy and Immunology that included new requirements related to dedicated time for program leadership and program coordinators. Due to an administrative error, the incorrect numbers for program leadership dedicated time (Program Requirement II.A.2.a) were published. The updated Requirements and FAQs are available under the "Future Effective Date" heading on the **Program Requirements and FAQs and Applications** page of the **Allergy and Immunology** section of the ACGME website. The ACGME apologizes for any inconvenience this may have caused.

Email questions to Executive Director **Louise Castile**.

Questions or comments regarding the ACGME e-Communication should be sent to [acgmecommunications@acgme.org](mailto:acgmecommunications@acgme.org)

175  
176 **II. Personnel**  
177  
178 **II.A. Program Director**  
179

180  
200 **II.A.2.a)** At a minimum, the program director must be provided with the  
201 dedicated time and support specified below for administration of  
202 the program. Additional support for program leadership must be  
203 provided as specified below. This additional support may be for  
204 the program director only or divided among the program director  
205 and one or more associate (or assistant) program directors. <sup>(Core)</sup>  
206

<u>Number of Approved Resident Positions</u>	<u>Minimum support required (FTE) for Program Director</u>	<u>Minimum Additional Support Required (FTE) for Program Leadership in Aggregate</u>
<u>1-6</u>	<u>0.15 FTE</u>	<u>0.05 FTE</u>
<u>7-10</u>	<u>0.2 FTE</u>	<u>0.1 FTE</u>

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Question	Answer
<p><i>What is the minimum support required for a program director and the program leadership?</i></p> <p><i>[Program Requirement: II.A.2.a)]</i></p>	<p>For a program with one to six approved resident positions, the program director must have a minimum of 0.15 FTE (six hours/week) protected time to support administration of the program. In addition, the program leadership (program director and associate/assistant program director(s) if applicable) must have a minimum of 0.05 FTE (two hours/week) of additional protected time to support administration of the program, which can be used by the program director alone (8 hours/week total) or can be shared with an associate program director. The additional 0.05 FTE (two hours/week) is intended to provide programs with the flexibility to incorporate an associate program director. The required FTEs are minimums, and programs can expand protected time for program administration above the 0.2 FTE (8 hours/week total) based on the needs of the individual program.</p> <p>For a program with seven to 10 approved resident positions, the program director must have a minimum of 0.2 FTE (eight hours/week) protected time to support administration of the program. In addition, the program leadership must have a minimum of 0.1 FTE (four hours/week) of additional protected time to support administration of the program, which can be used by the program director alone (12 hours/week total) or can be shared with an associate program director. The additional 0.1 FTE (four hours/week) is intended to provide programs with the flexibility to incorporate an associate program director. The required FTEs are minimums, and programs can expand protected time for program administration above the 0.3 FTE (12 hours/week total) based on the needs of the individual program.</p>

Allergy  
Immunology  
FAQ

449 II.C. Program Coordinator  
 450  
 451 II.C.1. There must be a program coordinator. (Core)  
 452  
 453 II.C.2. The program coordinator must be provided with dedicated time and  
 454 support adequate for administration of the program based upon its  
 455 size and configuration. (Core)

At a minimum, the program coordinator must be provided with the dedicated time and support specified below for administration of the program. (Core)

Following  
Public  
Comment  
RRC  
succeeded in  
establishing  
.3 from .2

Number of Approved Resident Positions	Minimum FTE
1-6	0.3
7-10	0.4

## Changes to CPR and Allergy and Immunology Specialty Specific Program Requirements

### PR II.B.4. -II.B.4.c) Core Faculty (*No changes to these PRs*)

II.B.4.

#### Core Faculty

Core faculty members must have a significant role in the education and supervision of residents and must devote a significant portion of their entire effort to resident education and/or administration, and must, as a component of their activities, teach, evaluate, and provide formative feedback to residents. (Core)

II.B.4.a)

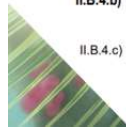
Core faculty members must be designated by the program director. (Core)

II.B.4.b)

Core faculty members must complete the annual ACGME Faculty Survey. (Core)

II.B.4.c)

The faculty must include at least two core faculty members. (Detail)



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## Protected time for Faculty

### Core Faculty and Associate Program Director

- Issues in mandating specific administrative FTE for faculty
- Should be acknowledged though without mandated FTE

Difficulty  
in  
mandating  
minimum

FTE



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## Burden Reduction

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- New ACGME Task Force on Burden Reduction to reduce administrative burden on program leaders, core faculty members, and program coordinators.
- ACGME and the GME community for novel ideas to address challenges in delivering educational experience for residents and fellows.



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## Burden Reduction

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- Going forward, focused revisions may be considered at to scheduled intervals between major revisions, which will **typically be every three years.**
  - On rare occasions, revisions may be considered between these scheduled intervals.



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## Site Visit

The ACGME has suspended in-person accreditation site visits. [Click here](#) for information about remote accreditation and recognition site visits.

### The Accreditation and Recognition Site Visit

The accreditation and recognition process for Sponsoring Institutions and programs includes on-site and remote site visits to assess compliance with the Institutional and Program Requirements, as applicable. All accreditation and recognition site visits for Sponsoring Institutions and programs are performed by Accreditation Field Representatives who are employed by the ACGME.

Refer to the Quick Links on the right side of the page for more information about Accreditation and recognition site visits.

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### Self-Study Due Date:

Postponed

### 10-Year Site Visit:

Postponed

### Self-Study and 10-Year Accreditation Site Visit

**Question:** Will a program's Self-Study be reviewed at the time of the site visit? What happened to the program 10-Year Accreditation Site Visit?

**Answer:** The Self-Study will no longer be reviewed during a site visit. Visit the program Self-Study web page for more FAQs about the program Self-Study and 10-Year Accreditation Site Visit.

**Question:** How does a Sponsoring Institution or program know when to initiate its Self-Study?

**Answer:** Seven to eight months prior to the Self-Study date noted in ADS, a Sponsoring Institution or program will receive an email from the ACGME to initiate the Self-Study. This emailed letter includes a link to resources for conducting the Self-Study.

Sponsoring Institutions and programs should start their Self-Study at that time but can certainly begin sooner. Program and Program Evaluation Committee leaders are encouraged to review the Self-Study resources page on the ACGME website for additional information. Institutional leadership should refer to the Institutional Self-Study guidance on the ACGME website.

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## Self-Study

The ACGME will not schedule any programs to begin their Self-Study through July 2022. This deferral period will allow the ACGME to develop a sustainable model for improvement and assurance for its nearly 13,000 accredited programs and allow programs to recover from the impact of COVID-19. Sponsoring Institution Self-Studies will proceed according to the Institutional Review Committee's announced plan. [Click here for additional FAQs regarding the program Self-Study and 10-Year Accreditation Site Visit.](#)

Await further  
instruction in  
regards to self  
study and 10  
year visits

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## ADS Highlights

- COVID-19 impact questions for ADS will not be used for accreditation purposes
- Questions will be asked on ADS pertaining to COVID-19 (may change over time)
- Response results data not fully available until a future date



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# Milestones 2.0

- New version began July 1, 2020
- Resources are available on the Milestones webpage and ACGME Learn

• milestones@acgme.org



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<b>Medical Knowledge 1: Basic Science of Allergy and Immunology</b>	
<b>Overall Intent:</b> To demonstrate the progression of basic science knowledge from immune system components to complex immunologic and allergic disease pathophysiology, as well as the basis for diagnosis, treatment, and research	
<b>Milestones</b>	<b>Examples</b>
<b>Level 1</b> <i>Demonstrates basic knowledge of the cellular and humoral components of the immune system</i>	<ul style="list-style-type: none"> <li>• Describes and differentiates features of innate and adaptive immunity</li> <li>• Describes basic lymphocyte subsets and immunoglobulin classes and subclasses</li> <li>• Describes the structure and function of primary and secondary lymphoid organs</li> </ul>
<b>Level 2</b> <i>Demonstrates advanced knowledge of the cellular and humoral components of the immune system and basic knowledge of normal physiology</i>	<ul style="list-style-type: none"> <li>• Describes the major components of humoral and cellular innate immunity</li> <li>• Describes the development of B and T cells</li> <li>• Describes the T and B cell receptor signaling cascade</li> </ul>
<b>Level 3</b> <i>Applies the knowledge of basic immunology to understanding the pathophysiology of common immunologic and allergic diseases</i>	<ul style="list-style-type: none"> <li>• Describes the role of filaggrin mutations and skin barrier compromise in the development and progression of atopic dermatitis and systemic allergic diseases, such as a peanut allergy</li> </ul>
<b>Level 4</b> <i>Applies the knowledge of basic immunology to understanding the pathophysiology of complex immunologic and allergic diseases and the basis for diagnosis, treatment, and research</i>	<ul style="list-style-type: none"> <li>• Describes the molecular defect resulting in the arrest of B cell development in X-linked agammaglobulinemia</li> <li>• Describes the detailed immunologic basis for a vaccine response and use of diagnostic vaccination in immunodeficiency evaluation</li> </ul>
<b>Level 5</b> <i>Serves as a content expert, invited lecturer or subject matter expert</i>	<ul style="list-style-type: none"> <li>• Is invited to present basic science research at a regional or national meeting</li> </ul>
<b>Assessment Models or Tools</b>	<ul style="list-style-type: none"> <li>• Board review participation</li> <li>• In-training exam</li> <li>• Journal club</li> <li>• Program level exams/quizzes</li> <li>• Staffing cases with attending</li> </ul>
<b>Curriculum Mapping</b>	•
<b>Notes or Resources</b>	<ul style="list-style-type: none"> <li>• Clinical Immunology Society (CIS) courses <a href="https://clinimmsoc.org/CIS.htm">https://clinimmsoc.org/CIS.htm</a></li> <li>• American Academy of Allergy Asthma and Immunology. Courses. <a href="https://education.aaaai.org/courses">https://education.aaaai.org/courses</a>.</li> <li>• American College of Allergy Asthma and Immunology. Courses. <a href="https://education.acaai.org/courses">https://education.acaai.org/courses</a>.</li> <li>• American Academy of Allergy Asthma and Immunology. 2019 In-Training Exam for Fellows Timeline. <a href="https://www.aaaai.org/professional-education-and-training/fellows-in-training/in-training-exam-for-fellows-timeline">https://www.aaaai.org/professional-education-and-training/fellows-in-training/in-training-exam-for-fellows-timeline</a>.</li> <li>• Core basic immunology and clinical allergy/immunology textbooks, such as:</li> </ul>



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# Accreditation Council for Graduate Medical Education

**LOG INTO**  
Accreditation Data System (ADS)  
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Case Log System  
Institution and Program Finder

- What We Do
- Designated Institutional Officials
- Program Directors and Coordinators
- Residents and Fellows
- Meetings and Educational Activities
- Data Collection Systems
- Specialties



## Quick Links

- Overview »
- Sponsoring Institution Emergency Categorization »
- Emergency Categorization Request Form 1-30 Days
- Emergency Categorization Request Form 31-60 Days
- Emergency Categorization Request Form 61-90 Days
- Emergency Categorization Request Form 91-Plus Days
- Transition to Residency »
- ACGME Guidance Statements »
- Frequently Asked Questions »
- Letters to the Community »
- Resources for Sponsoring Institutions
- Specialty Letters to the Community »
- Articles in JGME on COVID-19
- Newsroom and Blog Updates on COVID-19 »
- Well-Being Resources
- Resources from Other Organizations »
- Coalition for Physician Accountability »
- (Archived) Three Stages of GME During the COVID-19 Pandemic »



## Well-Being in the Time of COVID-19

The unprecedented challenges presented by the COVID-19 pandemic is testing our individual and collective resilience in the face of crisis. We take pride in how the medical community has risen to this challenge with dedication, innovation, and flexibility, delivering hope to those in need.

Nonetheless, this collective resolve in the face of challenge does not immunize us from the negative impacts of exposure to stress and trauma.

NEW ACGME COVID-19 GUIDEBOOK: **Guidebook for Promoting Well-Being During the COVID-19 Pandemic**

The residents and fellows who comprise a critical part of the physician workforce shoulder this responsibility alongside the rest of the medical community, facing the same challenges and assuming the same risks. While ready for the rigors of training, little has prepared them for the demands of the COVID-19 pandemic. Yet they answer the call to care for those in need and are meeting this challenge with courage.

The mission of the ACGME, assessing and advancing the quality of resident education through accreditation, calls on us to work alongside the graduate medical education (GME) community and beyond in understanding our shared needs now and into the future. In addressing the well-being of the GME community, the ACGME has responded to COVID-19 broadly.

### Other Resources

American Hospital Association:  
Updates and Resources on COVID-19

NETEC: COVID-19 Education and Training Resources

National Academy of Medicine:  
Resources to Support the Health



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## Distance Learning News

- [Assessment Tools](#)
  - Direct Observation of Clinical Care (DOCC) web app
  - Teamwork Effectiveness Assessment Module (TEAM)
- Faculty Development
  - Foundations of Competency-Based Medical Education
  - Managing your Clinical Competency Committee
  - Multi-Source Feedback
- Well-Being Resources and Tools
  - Page Redesign
  - <https://dl.acgme.org/pages/well-being-tools-resources>



#ACGME2022



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## Assessment Tools

### Direct Observation of Clinical Care (DOCC) web app

- Enables faculty evaluators to do on-the-spot direct observation assessments of residents and fellows
- Evidence-based frameworks provided for assessing six types of clinical activities
- Dictate feedback into app via mobile device
- Open source design permits programs and institutions to implement web app locally

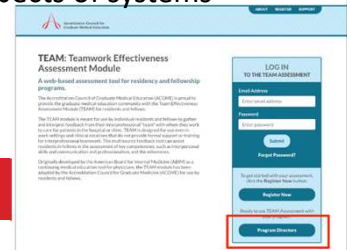
<https://dl.acgme.org/pages/assessment> for more information



### Teamwork Effectiveness Assessment Module (TEAM)

- Enables residents and fellows to gather and interpret feedback from their interprofessional “team”
- Assists programs in assessing key competencies of communication, professionalism and aspects of systems-based practice

<https://team.acgme.org/>

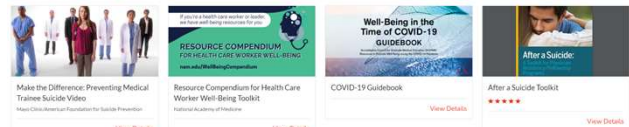


## Faculty Development & Well-Being

- Foundations of Competency-Based Medical Education
- Managing your Clinical Competency Committee
- Live and Hybrid Developing Faculty in Competency Assessment Workshops/Online Modules
- Curated Catalog of Well-Being Resources

<https://dl.acgme.org/pages/well-being-tools-resources>

### FEATURED RESOURCES



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### Systems Approaches to Well-Being



Resources

# Thank You!

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