2022 Program Directors Assembly
Business Meeting
April 7, 2022

Joseph Yusin MD
Chair, Review Committee for Allergy and Immunology

Conflict of Interest Disclosure

• No conflicts of interest to report
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Mission Statement
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.
Differences Between the ACGME and the Certifying Boards

- Accredits training programs
- Develops Program Requirements for training programs
- Evaluates programs through annual data review and site visits

- Certifies individual physicians
- Sets the standards residents and fellows must meet to gain certification
- Works with the ACGME to ensure alignment of Program and Certification Requirements

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 Kobrynksi, MD
- Kathleen R. May, MD
- Britannie 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

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

Effective: July 1, 2022

Incoming RC-A&I Members

- 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
### Allergy and Immunology Program Accreditation

**Academic Year 2021-2022**

- Total Programs: 84

### Upcoming RC Meeting Dates

**Allergy and Immunology**

<table>
<thead>
<tr>
<th>Meeting Dates:</th>
<th>Agenda Closing Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 24, 2022</td>
<td>January 7, 2022</td>
</tr>
<tr>
<td>January 5-6, 2023</td>
<td>October 7, 2022</td>
</tr>
<tr>
<td>March 23, 2023</td>
<td>January 6, 2023</td>
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</table>
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

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

Board Actions

- In June 2020, the Board approved formation of a special task force that would guide creation of requirements for the administration of the educational program for residents and fellows.
- Decision made in part due to variation in requirements among specialties/subspecialties and the goal of ensuring equity.

Based on unique needs of different specialties with responsibility to maintain equality standards.
Guiding Principles

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

Unique characteristics of specialty, and institution

Minimum requirements needed

Board Actions

• 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
Implementation

- 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.

Board Actions

- 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.
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 Castle.

Questions or comments regarding the ACGME e-Communication should be sent to acgmecommunications@acgme.org

II. Personnel

II.A. Program Director

II.A.2.a) At a minimum, the program director must be provided with the dedicated time and support specified below for administration of the program. Additional support for program leadership must be provided as specified below. This additional support may be for the program director only or divided among the program director and one or more associate (or assistant) program directors. (Core)

<table>
<thead>
<tr>
<th>Number of Approved Resident Positions</th>
<th>Minimum support required (FTE) for Program Director</th>
<th>Minimum Additional Support Required (FTE) for Program Leadership in Aggregate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-6</td>
<td>0.15 FTE</td>
<td>0.05 FTE</td>
</tr>
<tr>
<td>7-10</td>
<td>0.2 FTE</td>
<td>0.1 FTE</td>
</tr>
</tbody>
</table>
### Question
What is the minimum support required for a program director and the program leadership?

**Answer**
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.

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.

<table>
<thead>
<tr>
<th>Number of Approved Resident Positions</th>
<th>Minimum FTE</th>
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<tbody>
<tr>
<td>1-6</td>
<td>0.3</td>
</tr>
<tr>
<td>7-10</td>
<td>0.4</td>
</tr>
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</table>

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

- 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.

Burden Reduction

- 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.
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.

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.
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

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
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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### Medical Knowledge 1: Basic Science of Allergy and Immunology

**Overall Intent:** 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.

<table>
<thead>
<tr>
<th>Milestones</th>
<th>Examples</th>
</tr>
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<tbody>
<tr>
<td><strong>Level 1</strong> Demonstrates basic knowledge of the cellular and humoral components of the immune system</td>
<td>Describes and differentiates features of innate and adaptive immunity, describes basic lymphocyte subsets and immunoglobulin classes and subclasses, describes the structure and function of primary and secondary lymphoid organs</td>
</tr>
<tr>
<td><strong>Level 2</strong> Demonstrates advanced knowledge of the cellular and humoral components of the immune system and basic knowledge of normal physiology</td>
<td>Describes the major components of humoral and cellular innate immunity, describes the development of B and T cells, describes the T and B cell receptor signaling cascade</td>
</tr>
<tr>
<td><strong>Level 3</strong> Applies the knowledge of basic immunology to understanding the pathophysiology of common immunologic and allergic diseases</td>
<td>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</td>
</tr>
</tbody>
</table>

**Level 4** Applies the knowledge of basic immunology to understanding the pathophysiology of complex immunologic and allergic diseases and the basis for diagnosis, treatment, and research.

**Level 5** Serves as a content expert, invited lecturer or subject matter expert

- Is invited to present basic science research at a regional or national meeting

**Assessment Models or Tools**
- Board review participation
- In-training exam
- Journal club
- Program level exams/quizzes
- Staffing cases with attending

**Curriculum Mapping**

**Notes or Resources**
- Clinical Immunology Society (CIS) courses: [https://cслиmmemac.org/cis.htm](https://cслиmmemac.org/cis.htm)
- American Academy of Allergy Asthma and Immunology, Courses: [https://education.aaaai.org/courses](https://education.aaaai.org/courses)
- Core basic immunology and clinical allergy/immunology textbooks, such as:
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 needs.

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

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](https://dl.acgme.org/pages/well-being-tools-resources)
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
Thank You!