

Common Program Requirements – High Points

PROGRAM REQUIREMENTS (current 7/2023)

Supporting Document – ACGME Program Requirements for Graduate Medical Education in Allergy and Immunology

- Every Program will have a PRIMARY SITE. Any additional sites will require a PLA (Program Letter of Agreement) updated every 10 years. Each site will need to have a faculty “Site Director.”
- Programs should in partnership with the sponsoring institution, retain and promote a diverse workforce.
- Resources the Program must provide
 - --adequate exam rooms, computers etc.
 - --access to food and a refrigerator while on duty
 - --access to a lactation room and refrigeration
 - --adequate exposure to adult and pediatric allergy/immunology patients
 - --security
 - --accommodations for disabilities
- Program Director Requirements
 - 1-6 fellows = 0.15FTE and 7-10 = 0.2 FTE minimum support
 - ADDITIONAL SUPPORT mandatory to either the PD or could go to other faculty support 0.05 or 1.0 per above fellow numbers.
- PD Qualifications
 - --3 or more years educational/administrative experience
 - --see PROGRAM REQUIREMENTS FOR detailed list of modelled attributes the PD should demonstrate

FACULTY

- Not all faculty are required to be allergists, but you must have at least one allergist/immunologist who is certified by American Board of Pediatrics and one who is certified by the American Board of Internal Medicine.

CORE FACULTY

- Must complete the ACGME survey each year.

PROGRAM COORDINATOR

- Required to have a program coordinator as a lead administrator, facilitator between ACGME and program.

- Minimum 0.3 FTE for 1-6 trainees, and 0.4FTE for 7-10 trainees.

TRAINEES

- Termed “Residents” by ACGME despite being fellows.
- Must be IM or PEDS trained. May enter fellowship after 2 years of residency if in a research track.
- Must be from a US/Canadian training program or if International have a valid Educational Commission for Foreign medical Graduates certificate (ECFMG) or a license to practice in the US.
- Exceptions to the above rule may be made for exceptional candidates.
- Programs may only accept the number of trainees approved by the Review Committee.
- Changes to the above must be approved by ACGME.

CORE COMPETENCIES

- You need to understand these thoroughly! The document outlines these in detail. Evaluations and the milestones from the Clinical Competency Committee are organized around these.
 - --Professionalism
 - --Patient Care and Procedural Skills
 - --Medical Knowledge
 - --Practice Based Learning and Improvement
 - --Interpersonal and Communication Skills
 - --Systems-Based Practice

SPECIAL REQUIREMENTS

- Trainees must have experience in pain management if applicable for the specialty. (unlikely to be relevant for most A+I programs).
- There must be a structured curriculum for the core didactic topics. If your program were audited, how would you identify this curriculum?
- 50% must be in direct patient care (20% of this time must be pediatric, and 20% must be adult).
- 25% of the program should be devoted to scholarly activity/research.
- 25% of the program – other educational activities.
- A list of required educational exposure on page 26-27.

SCHOLARSHIP (FACULTY)

- Program must demonstrate scholarly activity (posters, articles, grand rounds etc.) (evaluated every 5 years by the Review Committee).
- Programs must demonstrate activity in at least 3 of 7 areas (Research, Grants, QI, Systemic reviews, curricula development, committee or editorial board, innovation in education).

SCHOLARSHIP (FELLOW)

- Research must be presented orally or in writing

EVALUATIONS

- Formative evaluation – monitoring learning and providing feedback.
- Summative evaluation – comparing the trainee to program requirements.
- Minimum time frame for evaluations is 3 months.
- PD or designee must meet with trainees semiannually to review specialty specific milestones and progress.
- All trainees require a Final Evaluation at the end of training which remains in permanent record.

CLINICAL COMPETENCY COMMITTEE

- Requirement for training and must include 3 faculty members, one of which is core faculty.
- CCC may include nurses or non-physicians.

FACULTY EVALUATION

- There must be a way to evaluate faculty performance.

PROGRAM EVALUATION COMMITTEE

- Must include at least 2 faculty members, at least one core faculty and at least one trainee.

ABAI PASS RATE

- In the past 3 years you must not be in the “bottom 5%” of all programs. Truthfully, for programs of 2 fellows per year, this means that in 3 years you will have 6 fellows and if 1 fellow fails, then you have only an 84% pass rate. It would be likely that if you had 2 fellows fail in this time period you would then be in the bottom 5% and merit scrutiny from ACGME.
- You must report annually the pass rate of fellows 7 years prior.

AREAS TO FOCUS ON OUTSIDE OF MEDICAL KNOWLEDGE

- Patient Safety (reporting, root cause analysis)
- Quality Metrics (Quality Improvement Projects)

SUPERVISION

- Direct Supervision. – Attending is physically present.

- Indirect Supervision – Attending is not physically present but is immediately available.
- Oversight – Attending is available to review case after care delivered.
- The program defines when each of the above is required. The program uses milestones to determine advancement through supervision stages.

PROFESSIONALISM

- This is outlined in the document and should be reviewed. This area is often an area of tension with trainees and can sometimes be harder to remediate.
- Programs need to model professionalism. If there are violations a clear reporting path must exist. ACGME will want to know exactly how trainees can report unprofessional conduct of faculty.

WELLBEING

- Area of high focus. Shared responsibility with institution and program.
- Must have opportunity to attend health care appointments including during work hours.
- Faculty training in burnout, depression, substance use.
- 24/7 access to mental health/counseling.

CLINICAL HOURS

- No more than 80 hours week/ averaged over 4-week period.
- Includes in house and educational activities AND moonlighting.
- 8 hours off between scheduled clinical work and education periods.
- 1 day in 7 free of clinical work and required education (averaged over 4 weeks).
- Cannot be on home call on free days.

Links:

<https://www.acgme.org/specialties/allergy-and-immunology/program-requirements-and-faqs-and-applications/>
https://www.acgme.org/globalassets/pdfs/faq/020_allergyimmunology_faqs.pdf