

# Orientation to Program Director Role



AAAAI/WAO  
JOINT CONGRESS  
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## Audience Response and Q&A

Please scan the QR code to participate in the Q&A or polling.



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## ARS

When you began as the APD or PD what kind of orientation or education did you get?

- A. None
- B. A casual reference to "most of what you need to know is on the ACGME website"
- C. A ½ session with the current program director going over websites, tips etc
- D. Structured orientation through your institution including both institutional and program specific content

### *Live Content Slide*

*When playing as a slideshow, this slide will display live content*

**Poll: When you began as the APD or PD what kind of orientation or education did you get?**



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**ACGME Acronyms**  
**Common Program Requirements – Brief Overview**  
**Institutional Requirements and Expectations**  
**General Calendar of Fellowship Activities**  
**Clinical Competency Committee**  
**Core Faculty**  
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**Surveys**  
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**Professional Development for Faculty**  
**Preparing a Well-Rounded Fellow**  
**Clinical and Academic Weakness in a Program**  
**How to Develop into an Effective Program Director**

## **ACGME – Acronyms and Oversight**

### **Acronyms:**

- **ACGME** – Accreditation Council for Graduate Medical Education
- **DIO** – Designated Institutional Official
  - Responsible for overseeing and administering all of the institution's ACGME programs
- **GMEC** – Graduate Medical Education Committee
  - The local institutional committee of Program Directors, Coordinators, chaired by the DIO
- **NRMP** – National Resident Matching Program
  - Ranking of fellow candidates occurs through this program
- **CLER** – Clinical Learning Environment Review
  - ACGME led institutional assessment (see below)
- **CCC** – Clinical Competency Committee
  - Committee meeting twice annually to evaluate trainee milestone
- **PEC** – Program Evaluation Committee
  - Committee meeting annually to evaluate training program
- **AAMC** – American Association of Medical Colleges
- **ERAS** – Electronic Residency Application Service (managed through AAMC website)
  - This program has migrated its data to Thalamus, but still serves as the hub for fellowship applications to a program

## **Procedure Log**

There is no longer a case log requirement for graduation.

The following are required procedures for which the minimum must be documented by graduation. Failure to record these or complete the required minimum will result in an ACGME inquiry and possibly a citation.

- Writing allergen immunotherapy prescriptions – 10
- Drug desensitization or incremental challenge – 10
- Immediate hypersensitivity skin testing – 30
- Write immunoglobulin prescription – 5
- Interpretation of pulmonary function testing – 30
- Food challenge testing – 5

### **Suggestions:**

- Check in with the first-year fellows 6 weeks into training to verify they are entering properly
- Set expectation that procedures are entered weekly
- Encourage fellows to complete all procedures before the end of their first year.
- Programs may wish to encourage trainees to log procedures diligently **even after** the individual trainee meets the minimum required, as this can be reviewed by the ACGME during a site visit as an indirect measure of patient/procedural volumes.

### **Links**

ACGME Case Log System

<https://apps.acgme.org/connect/login?ReturnUrl=%252fconnect%252f>

**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

**General Calendar Activities**

**July 1** – New Fellows Arrive

**July 15** – Register new fellows on ABAI

**August 1** – review applicants in Cortex and create interview list

**August 15** – complete ACGME ADS Annual update

**September 1** – Begin fellowship interviews

**September 15** – verify correct number of rank spots in NRMP

**September 30** – Review previous action plan from PEC meeting

**October 30** – Submit rank list to NRMP

**November 15** – Clinical Competency Committee

**December 1** – Review milestones with Trainee

**December 5** – submit milestones to ACGME-ADS

**December 10** – update [6 month](#) evaluation on ABAI

**January 10** – Program Director Assembly Meeting!

**February 15** – Review unaddressed Action items from PEC

**May 1** – Clinical Competency Committee

**May 5** – review milestones with trainee, submit to ACGME and ABAI.

Verify graduating fellows are completely signed [of](#) on ABAI for [6 month](#) evals and procedures.

**June 15** – Program Evaluation Committee meeting – create new action list

### **Core Faculty**

- Each program must designate at least 2 core faculty members.
- Selected for broad knowledge and involvement in the program.
- May be selected for specific expertise (mentorship, didactics etc).
- Core faculty must complete the annual ACGME Faculty Survey.
- Core faculty must have 0.1 FTE designated for the training program.

#### ***Suggestions:***

- Use Core Faculty to supplement your weaknesses.
- Have Core Faculty assist with mentorship and feedback.
- Empower Core Faculty to lead specific programs (Quality Improvement, Board Review course, etc).

#### **Links:**

<https://www.acgme.org/specialties/allergy-and-immunology/program-requirements-and-faqs-and-applications/>

### **Overview of the Clinical Competency Committee**

This committee meets at a minimum of twice per year and is instrumental in developing the milestone evaluation for each fellow. The meetings are generally in November and May of each year. This allows enough time to update the milestones into WebAds (Accreditation Data System) prior to the deadline. (There is a deadline)

#### ***Committee Membership***

- The committee is generally made up of the program director, the associate program director and core faculty. Additional faculty members are encouraged as well as at least one non physician member (nurse for example).
- The Program Director should NOT be the chairperson of the committee.
- There may be considerable variation in how the meeting is run. Some programs may decide together during the meeting the exact level for each of the milestones. Others may synthesize the discussion after the meeting. But each meeting should include a 360 degree evaluation of the fellow which should include patient surveys, ancillary staff input, rotation evaluations, procedure logs and any disciplinary action or complaints that might have come up since the previous meeting.
- After the Clinical Competency meeting, there are two important items that should take place. **First**, the new milestones need to be uploaded to WebAds. **Second**, the synthesis of the trainee progress with both opportunities for improvement and strengths should be communicated to the trainee.
- There will likely be considerable variation between institutions, but the documents and required elements for the meeting are generally provided by the Program Coordinator 1-2 weeks before the meeting.

#### ***Suggestions:***

- Ask your program coordinator what they currently do to assist in organizing the CCC
- Make sure you review the procedure log and read all evaluations prior to the meeting
- Fellows should start their training at a low score on the milestones. This is expected. They should gradually progress through their training.
- Before the committee meets, discuss with the CCC chairman any specific items you feel need to be addressed at the meeting

#### **Links**

<https://www.acgme.org/specialties/allergy-and-immunology/program-requirements-and-faqs-and-applications/>

## How you could use this...

- Ask new APD or your core faculty to review this
- When turning over the program from one PD to another, use this as a template to cover important items
- Will try to update annually
  - New competencies
  - Change in Core Faculty requirements
  - Scholarly Work committee
- Consider reviewing it now! [White.Andrew@scrippshealth.org](mailto:White.Andrew@scrippshealth.org)
- Email me for items we should add -  
Question bank resources