The Royal Australasian College of Physicians

The Royal College of Pathologists of Australasia

Committee for Joint College Training (JCT) in Immunology & Allergy

Guidelines for the Accreditation of Advanced Training Sites

Introduction

Advanced training in Clinical Immunology and Allergy is supervised by the Committee for joint college training (JCT) of the Royal Australasian College of Physicians (RACP) and the Royal College of Pathologists of Australasia (RCPA). Training is undertaken prospectively under the guidance of supervisors who provide formative and summative assessments of the trainees' program content and performance. It is the responsibility of the Colleges to ensure that sites that seek to provide advanced training are of an acceptable quality. The aims of the accreditation process are to:

1. Maintain the highest standards of training in the disciplines of Clinical Immunology and Allergy, and Immunopathology.
2. Assess sites for their capacity to provide opportunities for trainees to obtain the requisite level of expertise, in part or *in toto*, towards becoming a specialist Clinical Immunologist, and in some cases, Immunopathologist.
3. Ensure similar standards are met across the country.

The RCPA already has an accreditation process for sites training Immunopathologists. However, minimum criteria to be met by sites seeking to train Immunopathologists have not been defined. The RACP, through the Committee of Physician Training (CPT), has asked the Immunology and Allergy JCT to develop guidelines for the accreditation of sites seeking to train Consultant Physicians in Clinical Immunology and Allergy, including the definition of minimum criteria to be met by these sites.

The following guidelines pertain to these sites and will act in parallel to those of the RCPA (see attached).

The Purpose behind the Accreditation of Sites

The accreditation process will provide the JCT with important information on the facilities, level of supervision, clinical workload, educational opportunities and infrastructure available at each of the training sites. This will allow the application of minimum criteria to each site to help determine the duration of training and the number of trainees training concurrently that should be accredited at each site, and will provide training sites with constructive feedback on how they may improve the training for their trainees. The information gained during this process will also help trainees choose sites that will be appropriate to their training requirements.

The Accreditation Process

Standards and Criteria

A site seeking accreditation for advanced training must demonstrate that it has suitable staff, workload and facilities available to the trainee to allow advanced training in Clinical Immunology and Allergy. This will be assessed according to five general standards with criteria listed relating to each standard (see "Standards and Criteria for the Accreditation of Advanced Training Sites" attached). Each standard must be met before the site will be accredited. Documentation for each criterion will be required.

Immunology/Allergy Advanced Training Site Accreditation Form

The "Application for accreditation as an advanced training site in Clinical Immunology and Allergy" (see attached) will be sent to all potential Immunology/Allergy advanced training sites twice during each 5 year accreditation cycle. It will survey each site according to the Standards and Criteria.

The Training Site Accreditation Committee (TSAC)

A Clinical Immunology and Allergy Training Site Accreditation Committee (TSAC) will be convened by the chair of the JCT as a subcommittee of the Clinical Immunology and Allergy JCT.

Other members of this committee will be:

- The coordinator of advanced training (CAT) of the Clinical Immunology and Allergy JCT (a nomination of the Australasian Society of Clinical immunology and Allergy (ASCIA))
- The FRACP only representative on JCT (a nomination of the Australasian Society of Clinical immunology and Allergy (ASCIA))
- The paediatric representative on JCT (a nomination of the Australasian Society of Clinical immunology and Allergy (ASCIA))
- The trainee representative on JCT (a nomination of the Trainees Committee of the RACP)
- The Chief Examiner in Immunopathology, representing the Board of Censors (BOC) of the RCPA.
- Any other members nominated on a temporary basis by the chair of the JCT.

The TSAC will meet by teleconference up to twice a year as required.

Teleconferences will be in late February / early March and late September / early October each year to assess the Clinical Immunology/Allergy/Immunopathology Advanced Training Site Accreditation Forms that have been submitted during the preceding six-months. Responses to the written survey, as well as formal site visit reports, will be assessed according to the Standards and Criteria (see attached) and the TSAC will make recommendations on whether to provisionally accredit / reaccredit each site to the Clinical Immunology and Allergy JCT. When assessing site visit reports, the TSAC will decide whether to accept or amend the accreditation recommendations made in the site visit report.

The final decisions will be sent immediately to the applicants, the BOC of the RCPA and, to the Clinical Immunology and Allergy JCT for alteration / ratification at either the April/May or the November meeting.

What the TSAC/ JCT will accredit:

A site may seek accreditation in one of two categories of advanced training:

1) Accreditation for Physician and Pathology training (must be accredited by both the JCT and the BOA of the RCPA)
2) Accreditation for Physician training only (must be accredited by the JCT)

Sites may also seek accreditation for Immunopathology (FRCPA) - only training at the same time.

The training site will, in general, be located in a University accredited teaching hospital. In certain circumstances, other hospitals and private immunology and allergy practices will be considered for periods of accreditation, on a case by case basis.

A training site must be able to provide at least 12 months of training in order to be considered suitable for accreditation

The maximum period a site can be accredited for core clinical training is 2 years. Based on the diversity of clinical exposure and supervision, some sites may be accredited for shorter periods of core clinical training. Trainees are encouraged to spend time at more than one site during their training.

Accreditation based on the written survey form alone is provisional, and subject to a site / verification visit. Such accreditation would allow a potential new training site to recruit to a position and give the trainee confidence that his/her training will be accredited as core training, but a formal site visit would normally occur in the first year that such a trainee is in place.

Verification / Site Visits

Verification visits by members of the JCT will be timetabled 6-12 months in advance by the Chair of the JCT and will be approved prospectively by the CPT and BOC. The visiting team will consist of two Clinical Immunologists, at least one of whom must be a member of the JCT. If the site being accredited seeks accreditation for Clinical (FRACP) **and** Immunopathology (FRCPA) training, at least two members of the visiting team must Fellows of the RCPA; this may require a team of three Immunologists/Immunopathologists, or two inspectors with dual Fellowship. The State Councillor of the RCPA will also be invited to attend all site visits seeking approval for Immunopathology training.

The Chair of the JCT will:

- Appoint the visiting team who must then arrange their own travel, according to the College Travel policy
- Propose an appropriate date and time for the visit with the site in question
- Nominate a lead inspector on the team who will make the final detailed arrangements by liaising directly with the site personnel, as well as being responsible for writing the report.

All costs related to the site visits will be met by the College. Attempts should be made to co-ordinate the timing of site visits to coincide with meetings/other events to be held close to the training sites.

During the site visit, the training site will be assessed according to the Standards and Criteria (see attached). In addition, supervisor and trainee interviews will form integral parts of the site visit assessment. Therefore, sites will be visited only when there is a current trainee at that site. In general, sites with trainees can expect to be visited once during each five year accreditation cycle.

Following the site visit a report will be written by the lead inspector and amended as necessary by other team members. The report will include methods of assessment, the criteria by which the site was assessed, a recommendation on whether to formally accredit the site for advanced training (and in the event of a site failing to be accredited, the reasons for such a recommendation), and any other constructive comments that may help the site. If the site is accredited, a recommendation will be made on the duration of accredited training a trainee can spend at that site, divided by the various options for training under JCT /BOC, namely FRACP-only, FRACP/FRCPA and FRCPA-only, and including the maximum number of trainees that the site can supervise. Importantly, and irrespective of the accreditation advice, recommendations will also be made on how the training experience for trainees may be improved at that site. The report will then be sent to the contact person at the site, the other Immunologists at the site who are directly involved in training, and the trainee(s) for correction of any factual errors.

The final report will be discussed at the next JCT meeting, and if ratified, will be sent to the RACP and RCPA (if applicable) and will be considered at the next meeting of the JCT and the BOC of the RCPA (if applicable). The decision of the JCT will then be conveyed to the CPT and the BOC of the RCPA (if applicable).

It is possible for a site to be visited for assessment of both clinical and pathology training in a single visit (see above). Sites should be aware that a visit conducted for assessment of clinical training does not provide accreditation of laboratory training and vice versa.

Appeals Process

If a site does not gain a recommendation for provisional accreditation or reaccreditation from the TSAC, following ratification by the JCT /BOC, it may request a review of the decision at the following meeting of the JCT. If the JCT upholds the decision of the TSAC, the applicants may appeal the decision through the College Appeals Process.

If, following a site visit, a site does not gain accreditation or reaccreditation, the applicants may appeal the decision through the College Appeals Process. Any trainees at a site where accreditation has not been granted following a site visit will have the duration of current employment contract with that site accredited for advanced training.

Continuing Accreditation

To maintain accreditation, accredited sites must complete and return an “Application for Accreditation as an Advanced Training site in Clinical Immunology/Allergy and Immunopathology” form twice during a 5 year accreditation cycle – in the year prior to the commencement of the cycle, and during year 3 of the cycle. These will be sent to the Heads of accredited sites 12 months prior to the end, and at the beginning of year 3 of each accreditation cycle, and are to be returned to the two Colleges by 1st February of those years. This is to allow time for the report to be considered by the TSAC and then JCT /BOC, as outlined above, and for the results of the accreditation process to be available for trainees wishing to apply for jobs of the following year in July / August. When a site visit is performed at the time that the survey is due, the report on the training site accreditation visit can serve the function of the survey form.

Accreditation is normally given following a site inspection for a period of 5 years, but this may be shorter if there are perceived deficiencies in the training site, or concerns regarding impending changes. The written survey form sent in year 3 of the 5-year cycle is a check for

substantial changes to the training experience at the site, and a repeat site visit should be arranged if substantial changes are indeed uncovered.

If a site has no trainees, it may maintain its “provisional registration” by continuing to submit completed “Application for Accreditation as an Advanced Training site in Clinical Immunology/Allergy and Immunopathology” form as required. These sites will be visited as a priority in the first year that new trainees commence training at these sites.

Accreditation of training cannot be granted at institutions where site approval has not been granted or is out of date. Failure to maintain current site approval will lead to deferral of accreditation of training and may result in delay in granting Fellowship(s).

Accredited sites must notify the Chair of the JCT (within one month) of any change of circumstances within their facilities which may lead to their failing to meet the minimum criteria for accreditation. Failure to notify the change in status may result in withdrawal of accreditation status.

Overseas Training

Training obtained overseas is acceptable, provided the proposed training site meets the accreditation criteria. Overseas training sites will be assessed on information provided by the trainee’s supervisor/Head of Department in the form of a letter and a completed questionnaire. Formal accreditation of overseas training sites by the JCT is not required.

Standards and Criteria for the Accreditation of Advanced Training Sites

The overarching aims of accreditation are to determine whether a site meets the standards considered to be necessary to ensure trainees have opportunities to acquire expertise in diagnosis, investigation and management of patients across one or more of the core components of Clinical Immunology/Allergy, and in the case of joint FRACP/FRCPA trainees, Immunopathology. In addition, the assessment will take into account the breadth of the training experience offered. The former will determine whether a site can be accredited for training, and the latter will determine the duration of core training that can be accredited for a specified number of advanced trainees.

Several criteria will be taken into consideration when making these assessments, including the following. These will include:

Standard 1

The training site will provide adequate supervision for advanced training.

Criteria

- The training site must have one full time equivalent Consultant Clinical Immunologist to be accredited as a training site. Where a site has more than one trainee, the number of full time equivalent consultant staff should be appropriately increased to ensure adequate supervision of the trainees.
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- A Consultant Immunologist will be in attendance to supervise all clinical and/or laboratory activities of the trainee.

- The Consultant Clinical Immunologist will ensure that the trainee is involved in the daily running of the service, including care for in-patients, attendance at out-patient clinics, attending in-patients referred by other specialties for specialist consultations, and where applicable, performance and supervision of laboratory tests, signing out of laboratory reports, quality assurance and teaching activities.

Standard 2

The training site will have sufficient workload and diversity of clinical material for advanced trainees.

Criteria

- The service will provide at least two, half-day clinics, will have access to day only admission beds (for performance of rush desensitisation, immunoglobulin infusions, supervised challenges etc), and have access to overnight in-patient beds.

- A site will be assessed for the breadth of clinical, and in the case of joint FRACP/FRCPA trainees, laboratory exposure. The breadth of Clinical Immunology/Allergy practice includes allergic diseases, autoimmune/inflammatory diseases and immunodeficiency states. Opportunities available for acquiring expertise in each of these aspects of clinical practice will influence the period of core clinical training that will be accredited.

- The service will provide experience in the use and interpretation of immunopathology tests relevant to Clinical Immunology/Allergy practice, even for FRACP only trainees. The range of tests should ideally include autoimmune serology, in-vitro allergy testing, immunochemistry, enumeration of lymphocyte subsets, HIV diagnosis and monitoring, and immunogenetics. Where a service does not provide experience in a particular area of immunopathology (eg. in-vitro allergy testing, immunogenetics), arrangements should be made for the trainee to have access to training in these areas in other departments or sites, and these arrangements should be specified in the application. For joint FRACP/FRCPA trainees, the breadth of exposure to Immunopathology testing, will influence the period of core laboratory training that will be accredited.

Standard 3

The training site will provide a suitable infrastructure for advanced training.

Criteria

- The service will ensure that opportunities are available for the trainee to regularly attend scheduled inter-disciplinary clinical meetings. The trainee should present and discuss selected clinical cases at these meetings. In addition, the trainee will participate in undergraduate and postgraduate teaching where possible

- The service will provide access to a medical library with current text books, journals, and access to computerised databases. A case-based film library, with regular additions as required would be desirable

- The service will involve the trainee in routine quality assurance activities for the clinical service and (where applicable), the laboratory. Adequate clinical and laboratory procedure manuals, and patient documentation must be kept.

Standard 4

Where accreditation for immunopathology (FRCPA) training is sought (FRCPA), the service will provide access to the necessary experienced scientific staff to permit advanced training.

Criterion

- The service will employ, or demonstrate ready access to advice from scientists with expertise in performing diagnostic tests in immunology and allergy.

- The service will provide access to first-hand experience in the appropriate scientific and diagnostic methods.

Standard 5

The trainee will receive formal training in Clinical Immunology and Allergy +/- Immunopathology during their training.

Criteria

- The service will run an in-house continuing education program in clinical immunology and allergy for the advanced trainee

- The service will enable the trainee to attend, in each year of their training, the ASCIA advanced training meeting, or the training course in Immunopathology, or a scientific meeting of equivalent educational value to the trainee.

Standard 6

The service will have suitable research facilities for advanced training.

Criteria

- The service will have, or participate in an active research program.

- The trainee will be involved in at least one research project during the course of his/her training.

- The service will provide an active program (through meetings, journal clubs etc) where trainees will be encouraged to participate in critical appraisal of research papers.

- It is desirable that trainees will have opportunities for contributing to knowledge of Clinical Immunology and Allergy through research.