



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

President

Prof. Jan de Monchy, Holland

Vice Presidents

Dr. Victoria Cardona, Spain

Dr. Mona Palmqvist, Sweden

Prof. Petr Panzner, Czech Rep

**Secretary General
for the Section**

Dr. Jacques Gayraud, France

**Secretary General
for the Board**

Dr. Jose Rosado Pinto, Portugal

Treasurer

Dr. Paul Van Durme, Belgium

Adjunct Treasurer

Dr. Jose Rosado Pinto, Portugal

Past President

Prof. Sergio del Giacco, Italy

Honorary President

Prof. Antero G. Palma Carlos, Portugal

1- Board Certification of Training Centres

1

1.1. The conditions to be a Board Certified Training Site are as follows:

The conditions to be a Board Certified Training Sites are as follows :

Be recognised as a training facility in Allergology by the responsible national authority for this purpose in its Country.

Be directed by a doctor, who is a specialist in Allergology European Board Certified and recognised as trainer by the UEMS Allergology Board.

Contain the facilities to perform diagnostic assessments, functional investigation and measurement, and treatments relevant to the discipline of Allergology.

Maintain a network of contacts among clinical colleagues and professionals allied to medicine in hospital settings and services assisting the discharge of patients into the community.

Show training activity :

- in clinical domains through organising of case presentations, symposia, staff meetings and journal club meetings
- in research work by trainee participation in the research activities of the unit,
- in the domain of teaching in the availability of the requisite educational tools, particularly a library sufficiently stocked with Allergology texts and works, which are kept up to date as well as audio-visual aids for teaching.

NB - It is recommended that the number of trainees in any one unit does not exceed the number of available specialists in Allergology for training.

1.2. General scheme

If a service wishes to be recognized as a training centre by the European Section and Board of Allergology, registration to the Section & Board is the first compulsory step. The form can be found on the website of UEMS European Section & Board of Allergology and should be sent by regular mail: (a) to the Chairman of the Site Visit



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre : **Responsible:**

Committee, after verification of the files by the national manager and (b) to the Treasurer, who will check the Board Registration forms and payments.

Registration fees will be directly paid to the Treasurer in euro (either by credit transfer or banker's draft), at the same time as the registration file is sent.

Files and payment should be arranged before the visit. No visit will be done before receipt of full registration payment and of synthetic form.

In case the Head of the Dept. to be visited is not Board Certified, he has to include the application form for Board Certification by Equivalence as well as the application form for Board Certification as Trainer. There will be no visit unless the Head of the Department is Board Certified.

After the visit and the decision of the Board Jury, certification is often given for 5 years. If there are any recommendations, restricted certification is given. Recommendation should be followed by the local visitor in the appropriate period. If recommendations have been applied the full time-certification is attributed by the Jury. If the recommendations are not implemented within the provisory period the Jury has to decide for further procedure.

If an already certified Allergology training centre changes its Chief of Department it is required to make a new application for accreditation. It is preferable that two of the trainers in a unit are EB-certified specialists in Allergology, the Chief and another trainer. In case the new Head of the Dept. is the successor of the former and he is B.C. and trainer and the Service has not changed, the recertification process will be on file.

1.3. On site visit of the Centre

Before the Site visit, the National Manager is informed and should give information about the centres which wish to be visited for Board certification.

A Site Visit Committee is responsible for the management of visits to the Training centres that have applied for Board Certification. The visit should be organized by the president of the Committee of Certification of Training Centres who should be accompanied by a local visitor or in case of lack of local visitor by a national delegate of the Board.

The conditions to be a Board Visitor are as follows:

- To be a Allergology Board Certified physician
- To be a Board Certified Trainer
- To work in a Allergology Centre which has been accredited by the Board
- To have experience of the site visit process.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre : **Responsible:**

The Site Visit Team Leader needs to have participated in at least two previous site visits.

When the date of the visit is agreed upon, two representatives nominated by the Committee for the Certification of training Centres will evaluate the training programme of the centre. When the E.B site visit is combined with the National site visit, only one representative is required to carry on the site visit.

They meet with the trainers who will describe the centre, explain its organization and the training they offer the trainees. The facilities of the centre are inspected. Some of the administrators and e.g. Chief Allergology are seen and all trainees are interviewed. A synthetic form describing the service has to be presented by the applicant to the visitors on the day of the visit. They check it and after approval for certification, it is sent by Email to the Secretary, who will upload it on the website.

At the end of the visit, the provisional conclusions are presented by the visitors to the Chief of the training centre.

1.4. Process after the site visit

A report of each on-site visit is sent by the Site Visit Team Leader to the chairman of the Committee for Training Certification for discussion and decision during the next Jury meeting

An activity report has to be written by the chairman of the Committee for Training Certification and presented during each General Assembly. It will be added to the minutes of the General Assembly.

1.5. Meeting of the Jury.

The Jury for Board certification of Training Sites read the confidential report, discuss it, ask for further information and decide for approval.

1.6. After the Jury Meeting

After validation by the Jury, the list of Board Certified Training Centres and the full reports (with the synthetic forms) will be sent by the Chairperson of the Certification/Recertification of Training Centres to the Permanent Secretariat and to the webmaster, for display on the public website. The Board president notifies the applicants.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre : _____ **Responsible:** _____

Treasurer posts the Board Certification Diploma to the head of the Centre.

The Permanent Secretariat and the Chairman of the Committee for Training Centres Certification check the existing list of certified Training Sites twice a year and then the Treasurer puts the updated list on the website (on February and October).

1.7. Diplomas for Board Certification of training centres

Hereby certifies that ----- XXX under the direction of Dr YYY -----
Is certified as a training centre in Allergology (& Clinical Immunology)
until

Date ... VALID until ...

Signatures :

President of the UEMS Allergology Section & Board,
Secretary General of the UEMS Board

1.8. Recertification

Any Centre with certification for 5 years must re-apply for further accreditation.

Recertification will be awarded on file for five years if no change has taken place since the first visit. A new visit will be carried out if change has occurred.

The Chairman of the Committee for Certification of Training Centres is responsible for updating the Board Certified Training Centres in close cooperation with the Permanent Secretariat office and the Treasurer.

He/she will start the procedure of recertification. Information on recertification will be sent by the Chairman of the Committee for Certification of Training Centres (including application form and the Synthetic form).

Applicants for recertification send their application form to the mentioned Chairman, who is responsible of their management and will submit them to the Jury.

On receipt of these documents the Jury will make a decision during the January meeting each year and the President of the Board will send the information to the Head of the recertified Centre. The new Diploma will follow by post, sent by the Treasurer.



U.E.M.S. Section and Board for ALLERGOLOGY
Allergology training centre visitation procedure
Centre : **Responsible:**

2. GENERAL INFORMATION

Hospital /Centre.....
Programme director..... Co-director.....
Visitation date:.....

Address:.....
Telephone /fax:.....
E-mail:.....

Facilities to be visited:.....
In-patient dept:.....
Out-patient dept:.....
Number of locations:.....
Adherent hospitals:.....

Allergologists working in the hospital/centre:

Name	Initials	Title	Date of registration as allergist	
a.			/	/
b.			/	/
c.			/	/
d.			/	/
e.			/	/
f.			/	/



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

etc. / /

Please describe the formal position of the allergologists working in the centre:

Data for every allergologist working in the centre separately (including the programme director):

Name:.....

Initials:

Title:

Date of birth:

Percentage of working hours, total:

Percentage of working hours, in the centre:

Trained as an allergologist from / / to / /

Training centre / / to / /

Number of out-patient sessions per week:

Morning: from hour until hour

Afternoon: from hour until... hour

Credit Points (CME) in: 2012

2013

2014

- a. Scientific activities;
- b. Post graduate training (include photocopies of certificates etc.)

Are there any doctors of other specialities than Allergology working in the centre? YES NO

If YES, please describe the different other doctor functions:

.....
.....
.....

Please indicate individually the qualifications of all technicians and nurses working in the centre:

1.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

2.

3.

etc

Please indicate all medical doctors who are being trained as allergologists and indicate in which year they initiated their education: If there is a unified training scheme, please include this. If there are personalised schemes please supply all individual schemes.

1.

2.

3.

4.

5.

6.

etc

Are there doctors working in your department who are not being trained as allergologists?

1.

2.

3.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

Indicate which relevant medical books and journals are available in the library:

- 1.....
- 2.....
- 3.....
- 4.....

Other(s):

Indicate how electronic medical information sources can be accessed:

3. Production data of the Centre over the last 3 years

Number of *out*-patients:

	New patients	Control patients	Immunotherapy patients
2012
2013
2014

Number of *in*-patients:

2012	2013	2014
------	-------	------	-------	------	-------

Comments (if available):

.....
.....

Can you indicate how patients are referred to your practice (approximately) ?:



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre : _____ **Responsible:** _____

1. self referral%
2. referral by general practioner%
3. referral by medical specialists %
100 %	

From which medical speciality do you mainly get referrals:

1:..... 2:....., 3:..... 4:.....

Can you give production data for the last three years concerning your centre:

	2012	2013	2014
<u>Intra-cutaneous skin tests</u>			
Inhalant allergens
Food allergens
Drugs
Insect venom
PPD
Others:
<u>Skin prick tests</u>			
Inhalant allergens
Food allergens
Drugs
Insect venom
Others



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

	2012	2013	2014
<u>Epicutaneous (patch) tests</u>
<u>Other skin provocations tests</u>
Nasal challenges			
Histamine
Allergens
Spirometry and reversibility			
Spirometry and challenge
Histamine/ metacholine
Allergen
Others
<u>Oral provocations tests</u>			
Food
Additives
Drugs
Others
<u>Conjunctival provocations tests</u>			
Allergens
Others
<u>Hyposensitisation</u>			
Inhalant allergens
Insect venom
Others



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

Oral desensitisations

ASA	.....	.....	.....
Others	.....	.....	.....

Incremental Challenge

Local anaesthetics	
--------------------	-------	-------	-------	--

Others

.....	
-------	-------	-------	-------	--

4. Patients logistics out-patients

Indicate the average waiting time for new patients:

Indicate the average waiting time for control patients:

How much time is available for the intake of a new patient?

How much time is available for a control patient?

Do you have the possibility to see patients who are urgently referred?

Do you have enough technical (nursing) support during the out-patient sessions?

Are there other problems in the out-patients department?

Please indicate the nature of these difficulties:

Do you experience difficulties in realizing hospitalisation?

Please indicate the nature of these difficulties:

Do you have access to an intensive care unit, in case of emergency?

What arrangements have been made for night- and weekend availability?



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

Patient information

Please indicate which written medical patient information is available:

Who informs patients about inhaled or intranasal applied drugs?

Who informs patients about the use of peak flow meters?

Who informs patients about the use of auto injectors (EpiPen):

Who informs patients about specific dietary measures?

Who informs patients about adaptations to home- and working conditions?

.....

.....

.....

.....

.....

5. Do you have written protocols for procedures such as:

- | | | |
|--|------------------------------|-----------------------------|
| a. skin prick tests | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| b. intracutaneous skin tests | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| c. epicutaneous skin tests (patch tests) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| d. provocation tests, food | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| e. provocation tests, drugs | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| f. other (please specify) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| g. hyposensitisation conventional | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| h. hyposensitisation rush | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| i. hyposensitisation oral/sublingual | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Also indicate if you have written protocols for any of the following:

- | | | |
|---|------------------------------|-----------------------------|
| a. medical emergencies/life support | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| b. anaphylaxis | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| c. asthma attack | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| d. acute urticaria and/or angioedema | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| e. hyperventilation | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| f. collapse | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| g. handling of patients with (suspected) contagious conditions (tuberculosis, SARS, HIV, hepatitis, etc.) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

- | | | |
|---|------------------------------|-----------------------------|
| h. general emergencies (fire etc.) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| i. cleaning the department | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| j. cleaning instruments | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| j. maintenance and calibration of instruments | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| k. storage of allergen extracts | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| l. storage of drugs | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

6. Patient data and reporting – Communication & its evaluation

Describe how patient data are stored in your department:

How are referring doctors informed about their patients? Please specify:.....

How are complaints from patients or referring doctors handled? Please specify:.....

- **How do you evaluate the collaboration within the centre?**

Please specify:

Indicate how often you confer with the medical staff of the centre and which subjects are discussed:

Are the minutes of these meetings freely available? YES NO

Please indicate how often you confer with non-medical staff and which subjects are discussed:

Are the minutes of these meetings freely available? YES NO

Do you have a formal evaluation of all medical and non-medical staff, YES NO

please specify:



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

Are there conflicts within the group of allergologists:

YES

NO

If YES, please indicate about which item ?

- **How do you evaluate the collaboration with other specialists?**

Do you have a regular professional contact with other (medical) specialists, please specify:

a. Internist

YES

NO

b. dermatologist

YES

NO

c. pulmonologist

YES

NO

d. ENT specialist

YES

NO

e. paediatrician

YES

NO

f. bio chemist laboratory physician

YES

NO

g. dietician

YES

NO

Do you experience competition with regard to patient groups?

Please specify:

Are there conflicts with other medical specialists?

Do you have a structural contact with referring doctors?

- **How do you evaluate the collaboration with the hospital management:**

Is the budget for medical supplies sufficient?

YES

NO

Is the budget for specific Allergology supplies sufficient?

YES

NO

Is the "housing" of your centre adequate?

YES

NO

Do you have regular meetings with the hospital management?

YES

NO

Please provide the visitation committee with an annual report concerning your centre /specialist group if available.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre : _____ Responsible: _____

7. Specialist education/training programme

Do you have an education programme for medical specialists (allergists) YES NO

By which authority has your training programme been evaluated?

By which authority has your training programme been accepted?

Is your training programme being re-evaluated on a regular basis by an outside authority: YES NO

(Please supply all relevant documentation)

How many doctors are presently being trained at your department?

Please describe the formal position of the trainees working in the centre:

.....

What is the average weekly number of working hours for trainees?

Do trainees serve on night or weekend shifts: YES NO

How often do trainees have night or weekend shifts:

Are the facilities during shifts adequate?

Do trainees work in other departments? YES NO

Please specify:

What percentage of their working hours do trainees average spend on:

1. patient care	.....	%
2. Research	.....	%
3. education of medical students	.....	%
4. information of patient groups etc.	.....	%
Total		100 %

Are there weekly patient rounds/in depth discussions: YES NO

What other structured meetings are attended by trainees ? :



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

Please specify how medical supervision is structured for the trainees:

How are trainees educated in dermatology?

How are trainees educated in pulmonology/lung function?

How are trainees educated in ENT?

With what other medical disciplines do trainees have a regular contact?

How are trainees educated in clinical immunology? Please specify:

How are trainees trained in performing allergy tests?

Do the trainees follow a structured educational programme? YES NO

Please specify:

Do trainees have a regular evaluation of the progress of each individual trainee. YES NO

Please specify:

Are the trainees evaluated by formal examinations? YES NO

Please specify:

How have you structured feedback/criticism concerning the training programme by trainees?

.....

Is there a "general training committee" (specialist training) operational in your institution? YES NO

Do trainees have access to a dedicated immunologic laboratory? YES NO

Do the trainees have access "to up to date" or comparable sources of information? YES NO

Can the trainees visit national/international meetings? YES NO

Do they receive any reimbursement for such activities? YES NO

Please indicate how potential conflicts between the director of the training programme and trainees are handled:

.....

Thanks for collaborating. Now you can perform your self evaluation.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre : Responsible:

8. Before your visitation, make your self evaluation

SCORING GUIDELINES (from Sweeden. Developed September 1998, revised May 2003)

Background

The purpose of the inspection is for the inspector to form an opinion of the clinic's potential to provide practical training and education to doctors during specialist training (residency) in accordance with the description of goals for the specialty. The description of goals for the individual specialty serve as the basis of each individual inspection, though the criteria for structure and process variables can still be defined generally enough to apply to most specialties. They can thereby serve as an adequate basic standard for inspections. Of course individual specialties may formulate additional guidelines and carry out more detailed inspections during which individual elements of the description of goals are given special attention and documented in an organized manner. For example, the inspector might consider the number of examinations, interventions, and surgical procedures of a certain type performed by each resident. Similarly, the use of self-assessment tools in fields such as family medicine can be evaluated, but such specialty-oriented systems should be reported separately. The inspection focuses on both *structure* (or resources); in other words, the clinic's ability in terms of materials and personnel to provide satisfactory training, as well as *process* – the use of existing educational resources and the “educational climate.” Obviously it is easier to objectively describe the structure, while assessment of the educational process becomes more subjective. However, the inspector has to observe and evaluate both aspects, using the formulated guidelines to score the different elements. Good educational resources may not be used to their full potential because of inadequate involvement, and conversely, a positive educational climate may compensate for material deficiencies.

Basis for assessment

In summary, after completing the visit the inspector should be able to answer and comment on the following seven questions:

- A. Is the clinic's operation sufficiently *comprehensive* to fulfill the goals?
- B. Is the *medical staff* large enough and does it possess the expertise to fulfill the goals?
- C. Are the *facilities*, general and special *equipment* sufficient to fulfill the goals?
- D. is the position sufficiently *organized* to meet the goals?
- E. Is the *educational climate* sufficient to meet the goals?
- F. Is the *theoretical education* sufficient to meet the goals?
- G. Are there opportunities for *research* and development?



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

The written report should consist of a brief analysis, followed by a final score. Three separate areas, each to be commented and scored, are listed under the headings *structure* and *process*. Scoring must be accurate and standardized.

Inspectors will use the following scale of 0 to 3:

3 = excellent (ideal) - 2 = good - 1 = some inadequacies - 0 = significant deficiencies

In addition, the opportunity to participate in research should be assessed with yes or no (1 or 0).

Scoring criteria

STRUCTURE A. <i>Operations</i>	3 points: The requirements of the description of goals can be met through service within a limited geographic area (< 1h) and at interdisciplinary facilities within this area.	2 points: The requirements of the description of general goals can be met through planned rotations at other facilities. This rotation should be planned at the beginning of the residency position. Geographic conditions may involve moving to another town or long commutes.	1 point: The requirements of the description of goals can be achieved and planning is in place, but the planning changes several times for reasons other than the residency training, such as vacancies or priorities, or changed hospital assignments. Some on-call service is devoted to activities outside the specialty.	0 points: Operations are or will be inadequately comprehensive from an educational standpoint and no plan is in place to correct the situation.
Your own score – comments:				
STRUCTURE B. <i>Medical staff</i>	3 points: A sufficient number of doctors with adequate expertise (the number of doctors should allow for education, supervision and performance review during working hours). Supervisory specialists shall have completed formal training for supervisors. In addition to broad clinical expertise, the facility should also offer scientific, administrative and educational expertise that can be used during residency training.	2 points: A sufficient number of doctors with appropriate expertise, including formally trained supervisors. The occasional supervisor may lack formal training. Max. one resident/supervisor.	1 point: The number of specialists is adequate but vacancies affect the quality of the resident physicians' education.	0 points: Comp time (or equivalent) at supervisory levels entails a significant lack of continuity, both in guidance and instruction. Inadequate staffing or too many vacancies. Significant deficiencies in clinical expertise of specialists.



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

Your own score – comments:				
STRUCTURE <i>C. Facilities</i>	3 points: Adequate facilities and assigned offices designed in consultation with the involved resident physician. On-call rooms maintain good hotel standard.	2 points: Adequate facilities (surgery, lab, reception, wards, on-call rooms, other workspaces incl. equipment) and services (e.g., secretarial positions, library, literature search and journals).	1 point: Occasional deficiencies. Example of inadequate facilities: if the doctor's office on the ward for conferring with patients is located outside the ward or used for other purposes, such as turnover reporting.	0 points: Occurrence of many deficiencies as described above.
Your own score – comments:				
PROCESS <i>D. Structure of the residency position</i>	3 points: A director of studies is on site at the clinic/division (equivalent) and functional. The description of goals is used, as are the guidelines for specialist training. Established residency training program, including subspecialty training. The specialty training program is designed to meet the requirements of the description of goals. The performance review is documented, clearly indicating how deviations from the training program are handled. On-call service is an integral part of the education. Extra initiatives are taken to improve the education (e.g., senior colleague with time allocated for special skills training focused on the educational needs of the resident physicians) over those of the training program.	2 points: People are aware of the general goals; the residency position is adapted to these goals by starting at the foundation and as knowledge and skills gradually increase, scheduling shorter rotations in more specialized areas of the operation. Documented regular conferences with the supervisor; the inspector does not need to read the documentation, but should be assured that conferences were held.	1 point: Occasional deficiencies. For example, inadequate documentation, but consensus (Clinical Director, Director of Studies, Supervisor and Resident) that the structure of the residency position is good. The clinical director feels that the requirements of the description of goals can be met, but with no such documentation in the educational plans. Conferences with supervisors are undocumented (the inspector should not personally read the documents).	0 points: Considerable deficiencies as described above, with the requirements of the operation always taking precedence.
Your own score – comments:				



U.E.M.S. Section and Board for ALLERGOLOGY

Allergology training centre visitation procedure

Centre :

Responsible:

<i>E. Educational climate</i>	<p>3 points: Planning for training of skills. Conferencing with supervisor as appropriate (resident and supervisor agree). Time allocated for and acceptance of literature studies. Feedback and involvement, preferably with examples. Rotation at regional hospital or University Hospital is encouraged to obtain more in-depth knowledge and continued specialization after formally qualifying as a specialist. Positive attitude toward interdisciplinary training. Residents are “visible” and their opinions and experiences are put to use.</p>	<p>2 points: Consensus between supervisory doctor/specialist and the resident about the program structure. Time allocated and acceptance of theoretical studies and interdisciplinary training.</p>	<p>1 point: Guidance “during working hours” is rarely provide; consensus is inadequate. Indifference to “necessary” interdisciplinary training. The occasional enthusiast may be found.</p>	<p>0 points: Residents are viewed exclusively as a source of labor and are expected to learn by following the example of older colleagues.</p>
Your own score – comments:				
<i>F. Theoretic training</i>	<p>3 points: Planned external training, including specialist association recommendations (specialist training courses, annual medical congress, specialist association meetings, international courses/meetings, etc), provided at least five days per term. Regularly scheduled in-house education at least one hour per week. Program includes checking off the resident physician's study requirements. Program provides training in leadership and administration.</p>	<p>2 points: Less external education than described above (though not less than what the specialty association recommends in its education requirements), checking off the resident's study requirements, in-house education less than about two hours per month.</p>	<p>1 point: Few opportunities for courses and/or poor in-house education. No follow-up or monitoring of the resident's theoretical studies.</p>	<p>0 points: No theoretic education during working hours.</p>
Your own score – comments:				



U.E.M.S. Section and Board for ALLERGOLOGY
Allergology training centre visitation procedure
Centre : **Responsible:**