STANDARDS FOR

EAACI CENTRE OF EXCELLENCE (ECE)

EAACI aims to improve quality of health care, research and education in the area of allergy and clinical immunology. With this as a priority, EAACI established the “EAACI Quality Centres”. which are categorised under the terms of "Centre of Excellence” (ECE), EAACI Advanced Research Centre; and EAACI Certified Clinic (plus Research) in certain fields of Allergy and Immunology.

EAACI guarantees that all processes related to the Quality Centre will be managed under **quality standards**. This document provides information about the process AND standards for the application of the EAACI Centre of Excellence (ECE). There are two different types of standards:

Essential (Basic) standards: The rationale behind these standards is to certify the centres who provide standardised approaches in the area in question.

Area for Improvement: These aspects may not necessarily be addressed during the initial application. However, should centres choose to apply for recertification after a period of five years, they will be required to meet both the "basic standards" and the "identified areas for improvement". If, at the time of the initial application, centres already possess evidence relating to these areas, such documentation may also be submitted.
The underlying rationale for including “Areas for Improvement” is to encourage the expansion of activities and the strengthening of collaboration and networks among centres. In doing so, the ultimate aim is to enhance the overall quality of care within the relevant category across Europe.

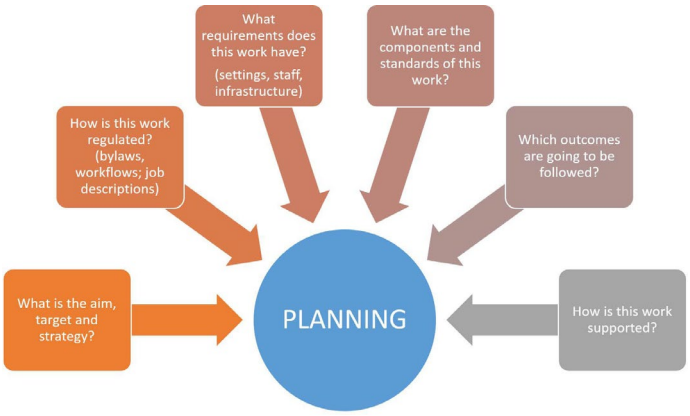
Please review the standards to ensure your centre meets the basic criteria. If so, kindly prepare a brief report outlining how these standards are met, attach supporting digital evidence, complete the application form, and submit all materials electronically to the Quality Committee.

The evidence listed in the designated box for each basic standard should be provided in digital format (Word or PDF) and clearly numbered according to the relevant section (e.g. Section 1.1). All supporting materials—including JPEG images and other electronic documents—may be compiled into a single PDF with appropriate explanations and section numbering. Centres may also upload additional evidence to further support their eligibility and competence. Digital evidence may be submitted in the centre’s native language.

Contact information: info@eaaci.org

As the EAACI family, we are delighted to introduce this important initiative, which aims to enhance the impact of patient care and research, while also strengthening our collaborations and network across Europe.

QUALITY STANDARDS 1: PLANNING



1.1 AIM AND STRATEGY

1. The centre should have a strategy on patient care, education and basic or clinical/ translational research in the field of allergy and Immunology.

EVIDENCES FOR BASIC STANDARDS

- □ A statement of the centre about their aim
- □ Strategic plan of the centre and/or description of patient care, education and basic or clinical/translational research

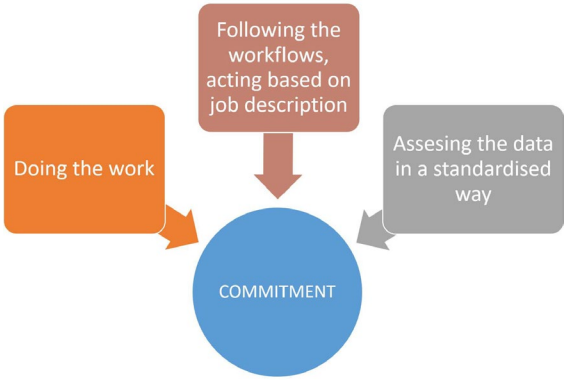
1.2 REGULATION

1. The centre should have relevant instructions, Standard Operating Procedures (SOP) and definition of works and workflows related to general procedures (ie: patient care, research; education, etc)
2. Job descriptions should be available for staff working/positions within the centre.
3. Clinical staff must adhere to established quality standards, such as protocols, standard operating procedures (SOPs), and workflows, in alignment with the centre's guidelines and practice parameters. They should contribute to the development and periodic review of these standards to ensure optimal patient care.

EVIDENCES FOR BASIC STANDARDS

- □ Works and Workflows
- □ Job descriptions of the staff working in the centre as well as position types (PhD student, fellowship, etc…)
- □ Documentation of established clinical guidelines, standard operating procedures (SOPs), and protocols followed by the centre, including their review dates
- □ Reports or evaluations from quality assurance activities, audits, or reviews conducted on clinical practices within the centre, showing compliance with established quality standards

QUALITY STANDARDS 2: DOING



2. STANDARDS

2.1 EAACI Involvement

At least two of the physicians/staff should be current EAACI members **AND fulfill at least 2 of the following criteria:**

1) Participation in EAACI guidelines and position papers within the last five years
2) Active involvement in EAACI ExCom, Committees, Interest Groups (IGs), Working Groups (WGs), or Sections
3) Organisation of EAACI-endorsed scientific events, workshops, or training programmes
4) Hosting of EAACI mentorship programs for early-career researchers and fellows
5) Recognition through EAACI or other scientific awards
6) Having junior members (JMs)

EVIDENCES FOR BASIC STANDARDS

- List of the team members with their EAACI membership numbers and roles within the centre
- Documentation of EAACI involvement, such as:
  - Copies or references to guidelines and position papers contributed by the centre's members.
  - Proof of participation in EAACI ExCom, Committees, IGs, WGs, or Sections (e.g., meeting minutes, membership confirmations)
  - Evidence of organised EAACI-endorsed scientific events, workshops, or training programs (e.g., event programs, flyers, or official EAACI recognition)
  - Confirmation of mentorship programme hosting (e.g., mentor-mentee assignments, program descriptions)
  - List of awards provided by EAACI received by the centre's researchers
  - Proof of Junior membership (JMs)

AREA OF IMPROVEMENT

- Staff should be encouraged to participate in EAACI committees, working groups, guideline development, and mentorship programmes
- Increased number of the staff being EAACI members OR JMs (depending on the eligible staff)

2.2. Multidisciplinary team

- The centre should be a multidisciplinary facility, with faculty members from allergy & immunology and at least two other relevant specialties or PhD programmes.
- These could include, but are not limited to, immunology, pulmonology, dermatology, ENT, pediatrics, or clinical nutrition, ensuring a collaborative environment that facilitates comprehensive patient care, research, and education across disciplines.
- The centre should employ staff with MsD or PhD degrees in relevant fields.

EVIDENCES FOR BASIC STANDARDS

- □ List of the multidisciplinary staff with confirmation of their role in the centre.
- □ Notes/minutes of the multidisciplinary meeting , patients discussions and research meetings.

2.3. Research

1. The centres should be equipped with technologies and equipment that meets international standards for safety and performance, for its research activities.
2. The centre should have technical staff responsible for the equipment and for training new scientists.
3. The centre should have a research laboratory.
4. The centre may have established collaborations with other facilities for the methods not available in the centre.

Standards for High Research a Performance

1. At least one member of the unit should have a H-index ≥30 (Web of Science)
2. Having at least 10 research articles published in peer reviewed journals in the last 5 years, at least 4 four of them being translational studies.

AND fulfilling at least 3 of the following criteria:

1. Having a budget for research exceeding 200.000 € (grants from university, national institutes, european foundations etc) in the last 5 years.
2. Currently having at least 2 active research projects funded by national or international grants, excluding regional or private foundations.
3. Participation in clinical trials or registries (at least 3 in the last 5 years).
4. Having a patent in the last 10 years.
5. Presenting at least 15 abstracts in allergy and immunology congresses in the last 5 years: 10 of them in national congresses and 5 in EAACI or other international congresses.
6. Offering or being affiliated with MsD or PhD programs in allergy and immunology or associated fields.

EVIDENCES FOR BASIC STANDARDS

- □ List of staff members with specializations, their degrees and academic qualificationsList of the equipment/technologies available in the research centre
- □ List of technical staff and responsibilities
- □ Organizational chart of the research team, indicating roles and responsibilities in ongoing research projects.
- □ Pictures of the equipments, rooms, laboratories
- □ List of collaboration facilities

- □ Documentation of participation in clinical trials and registries, including study titles and reference numbers
- □ List of the active projects of the centre and type of funding
- □ List of the peer-reviewed published articles on allergy/immunology of the last 5 years, providing links to abstract/full text manuscripts
- □ List of the abstracts presented in congresses (national and international) of the last 5 years
- □ List of international research collaborations, joint projects with other institutions or centres, and any specific agreements (e.g., Memorandums of Understanding) that show active participation in international networks or consortia
- □ Grant and funding records demonstrating at least 200,000 Euros in research funding secured over the last five years
- □ List of patents
- □ List of PhD students and technical staff actively engaged in allergy-related research

AREA FOR IMPROVEMENT

- □ The centres are encouraged to Increase the access to new equipment/technologies in the area
- □ The centres are encouraged to be involved in multicentric studies
- □ The centres are encouraged to apply for collaborative networks
- □ The centres are encouraged to apply for European/international grants
- □ *Ensuring research outputs are more freely available under Open Access policies*
- □ The centre should offer or be affiliated with MsD or PhD programs in allergy and immunology or related fields (if doesn't exist)

2.4. Patient Care

1. The centre should be recognised as a reference centre for at least one specific area (e.g., asthma, severe asthma, drug allergy, food allergy, eosinophilic esophagitis, rhinology, allergen immunotherapy, etc.), providing specialised care and research in that field.
2. The centre should have dedicated outpatient and inpatient facilities for the diagnosis, treatment, and long-term management of allergic and immunologic diseases.
3. The centre should be equipped with state-of-the-art diagnostic and therapeutic facilities, including skin prick testing units, spirometry, IOS, FeNO measurement, food/drug challenge testing areas, allergen immunotherapy, biological treatment and desensitization rooms.
4. There should be a dedicated anaphylaxis management unit with immediate access to emergency medications and resuscitation equipment.
5. The centre should have a well-structured workflow for patient referral, follow-up, and multidisciplinary case discussions, supported by an integrated electronic medical record system.
6. Dedicated infusion and immunotherapy units should be available for allergen-specific immunotherapy, biologics, desensitization and other advanced treatments.
7. The facility should ensure accessibility and comfort for pediatric and/or adult patients, including child-friendly consultation rooms where applicable.
8. The centre should have established and active collaborations with patient associations, ensuring a patient-centreed approach in clinical care.

EVIDENCES FOR BASIC STANDARDS

- □ List of dedicated clinical units (outpatient, inpatient, emergency, and immunotherapy units)
- □ List of patient volume, expertise, and contributions to guidelines or research in the specific area

- □ List of specialized diagnostic and treatment equipment available (e.g., spirometry, FeNO, challenge testing, allergen immunotherapy, desensitization areas)
- □ Pictures of patient care facilities and equipment
- □ Copies of clinical protocols, SOPs, and structured workflows
- □ Documentation of the electronic medical record system
- □ List of collaborations with patient associations (letters, joint program descriptions)
- □ Documentation of multidisciplinary team meetings and case discussions.
- □ Floor plan or layout of patient care facilities.
- □ Records of joint initiatives, such as awareness campaigns, educational programs, or patient support services.
- □ Examples of patient educational materials (brochures, leaflets, videos) co-created or distributed in collaboration with patient associations.
- □ Documentation of workshops, seminars, or community outreach programs involving patient associations
- □ Evidence of patient satisfaction surveys or feedback mechanisms that include input from patient associations

AREA FOR IMPROVEMENT

- □ Correspondence or memoranda of understanding (MoU) with patient associations.
- □ The centre should engage in joint initiatives with patent associations, such as awareness campaigns, educational programs, or support services, to improve patient outcomes
- □ Evidence of partnerships with relevant patient organizations in specific fields (e.g., asthma, drug allergy) should be provided. This can include patient education materials, joint workshops, or participation in advocacy events

2.5. Education and faculty/staff development

1. The centre should have a fellowship program for allergy and immunology
2. The centre should have designated spaces for teaching and training, including lecture halls, seminar rooms, and simulation labs equipped with modern audiovisual tools
3. The centre should have access to a medical library with up-to-date literature or online journal subscriptions, and educational materials on allergy and immunology
4. There should be a dedicated space for hosting workshops, clinical rounds, and EAACI-endorsed training programs.
5. There should be regular training sessions* (ie: weekly seminar, journal club…) on allergy immunology in the centre
6. Continuous education in allergy and immunology should be actively promoted through courses, workshops, and conferences
7. Clear pathways for academic and clinical promotion should be established within the centre
8. The centre should facilitate staff engagement in international collaborations and scientific networks

EVIDENCES FOR BASIC STANDARDS

- □ Curriculum of the program for fellows
- □ List of designated educational spaces (lecture halls, seminar rooms, simulation labs)
- □ Pictures of educational spaces and training facilities
- □ Documentation of access to a medical library or online learning resources
- □ List and descriptions of available training sessions/programs, courses, and workshops offered by the centre
- □ Records of staff participation in educational activities in the last 5 years

- □ Template of evaluation forms used for staff assessments
- □ List of mentorship programs and assigned mentors/mentees
- □ Documentation of staff participation in EAACI events, international collaborations, or scientific networks.
- □ List of available training sessions related to research methodologies
- □ Records of staff participation in MsD or PhD training programs.

AREA FOR IMPROVEMENT

- □ The centre should have formalized staff development programs that include clinical, research, and academic training to ensure professional growth
- □ Each staff member should have this program at the beginning of his/her position/service in the centre
- □ The staff working in the patient care should have training on Communication Skills
- □ Members in training should be encouraged to join the courses related to allergy and immunology or new technologies: course certificates earned in the last 2 years
- □ All faculty members are encouraged to have CME credits provided for both EAACI events and activities
- □ All faculty and staff should undergo an annual evaluation by their direct superior to assess personal progress, goal achievement, and define future career and research objectives
- □ The centre should provide mentorship programs for junior staff, including structured career development plans
- □ Staff should have access to training in multidisciplinary and translational research methodologies, integrating clinical practice with basic and applied research
- □ Staff members should receive continuous education and training on current guidelines, protocols, and emerging trends in clinical practice, ensuring they remain updated on the latest advancements in allergy and immunology

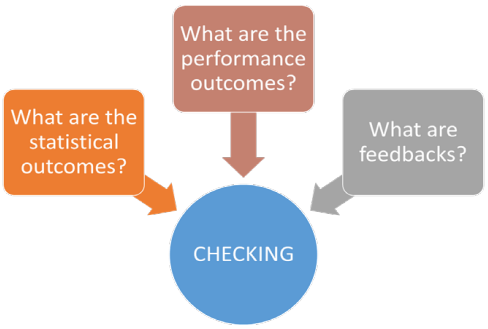
2.6. Archiving and data protection

1. There should be an electronic or physical data storage system of the centre.
2. Data about the patients should be kept under the regulation of individual data protection.

EVIDENCES FOR BASIC STANDARDS

- Documentation about data storage system
- Documentation on confidentially of the data

QUALITY STANDARDS 3: REVIEWING



3.1. EVALUATION OF THE CENTRE

1. The CENTRE should have determined assessment tools to follow up the performance of the Academic/Research, Education and Clinical (patient care) activities.
2. The centre should get all the relevant data for assessment of these predetermined outcomes

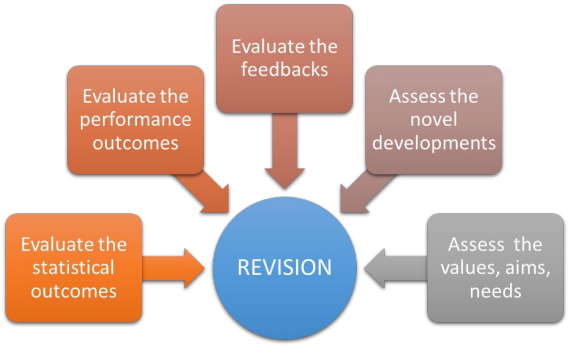
EVIDENCES FOR BASIC STANDARDS

- Document of the strategy of the centre on assessing methodology of the performance and outcomes of the centre
- Document of the follow up criteria for evaluation of the outcomes of the centre
- Reports on these outcomes (from the last year)

AREA OF IMPROVEMENT

1. Feedback provided by staff and patients as well as satisfaction should be considered
2. The centre should define strategic performance criteria in addition to descriptive analysis (ie: increase the number of publications, opening new PhD programs)

QUALITY STANDARDS 4: REVISION OF THE PROGRAM



4.1 REVISION OF THE PROGRAM

1. The centre should review all the outcomes and follow up criteria
2. These outcomes should be evaluated in regular time intervals (at least annually)
3. Relevant reports should include descriptive and performance analysis of the centre

EVIDENCES FOR BASIC STANDARDS

- The monthly or annual reports on follow up criteria of the last year
- The documents on how the centre evaluates these outputs
- Meeting reports on decision about their evaluation of the centre.

AREA OF IMPROVEMENT

- *Action plan based on evaluation of the all outputs*