

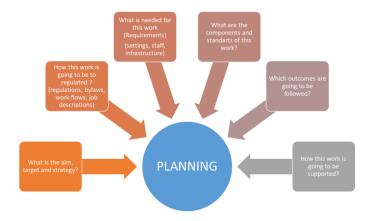


STANDARDS FOR

EAACI CENTRE OF EXCELLENCE (ECE)

Please first read the document of "Question and Answers for the Quality Centres" and follow the necessary steps to prepare your application.

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

EVIDENCE 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 (i.e.: 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

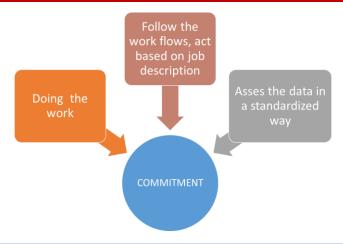




EVIDENCE FOR BASIC STANDARDS

- □ Relevant instructions, SOP
- ☐ 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 fulfilling at least 2 of the following criteria:**

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





EVIDENCE 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
 - o Proof of participation in EAACI ExCom, Committees, IGs, WGs, or Sections (e.g., meeting minutes, membership confirmations)
 - Evidence of organized EAACI-endorsed scientific events, workshops, or training programs (e.g., event programs, flyers, or official EAACI recognition)
 - Confirmation of mentorship program hosting (e.g., mentor-mentee assignments, program descriptions)
 - List of awards provided by EAACI received by the centre's researchers
 - Documentation of junior members (JMs)

AREA OF IMPROVEMENT

- Staff should be encouraged to participate in EAACI committees, working groups, guideline development, and mentorship programs
- ☐ 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 programs
- These could include, but are not limited to, immunology, pulmonology, dermatology, ENT, paediatrics, 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

EVIDENCE 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 or should have access to a research laboratory for collaboration
- 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

EVI	DENCE FOR BASIC STANDARDS
	Documents related to existing of a research laboratory (provided by research lab. responsible
	person, or head of department or hospital administration)
	List of staff members with specializations, their degrees and academic qualifications
	List 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 equipment, 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 5 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

2.4. Patient Care

- 1. The centre should be recognized 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 specialized 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 paediatric 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-centred approach in clinical care

EVIDENCE 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 (particularly related to outstanding
	area such as asthma, food allergy etc)
	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
	Records of joint initiatives, such as awareness campaigns, educational programs, or patient support
	services
	collaboration with patient associations
	associations
	associations
ADEA	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
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2.5. Ed	ucation and faculty/staff development
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□ 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
Г	academic training to ensure professional growth Each staff member should have this program at the beginning of his/her position/service in the
L	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 topics or new technologies: course certificates earned in the last 2 years
	development plans
	Staff should have access to training in multidisciplinary and translational research methodologies, integrating clinical practice with basic and applied research

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

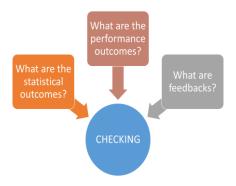
EVIDENCE FOR BASIC STANDARDS

- 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

EVIDENCE FOR BASIC STANDARDS

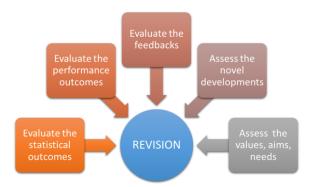
- Document of the strategy of the centre on assessing methodology of the performance and outcomes of the centre
- Document of the follow up criteria for evaluation of the outcomes of the centre.
- ☐ Reports on these outcomes (the last year)

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 (i.e.: increase the number of publications, opening new PhD programs)







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

EVIDENCE 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.