Operational Procedures of the
American College of Microbiology’s
Committee on Postgraduate Educational Programs

Established by the
Committee on Postgraduate Educational Programs
in collaboration with the
American College of Microbiology
Professional Practice Committee of the American Society for Microbiology

Revised September 2015
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1. Preamble

The American College of Microbiology (College) is the body within the Professional Practice Committee of the American Society for Microbiology (ASM) that promotes professional recognition and fosters the highest scientific and ethical standards among microbiologists and immunologists in service to science and the public. The Board of the College shall appoint committees and establish boards to independently conduct the accrediting and certifying activities for the College.

The College has delegated to the Committee on Postgraduate Educational Programs (CPEP) the responsibility for performing the duties and making the decisions concerning accreditation (approval) of postgraduate fellowship training programs in medical and public health microbiology and medical laboratory immunology. Educational programs accredited by CPEP may be located in laboratories of hospitals, public health agencies, universities, and other appropriate institutions in the United States (or elsewhere, if desired and deemed appropriate) performing medical microbiology or immunology at a high level.

2. Board of the College – Responsibilities

The Board of the College may, with cause and after due process, replace the Chair of CPEP. Appropriate causes would be inactivity of the Committee or failure of the Committee to perform its duties in a timely and ethical manner in accordance with the Operational Procedures, Essentials and Guidelines of an Accredited Postgraduate Residency Program in Medical and Public Health Laboratory Microbiology (Essentials Microbiology) and Essentials and Guidelines of an Accredited Postgraduate Residency Program in Medical Laboratory Immunology (Essentials Immunology), and the Code of Ethics of ASM.

3. Description of the Committee on Postgraduate Educational Programs (CPEP)

3.1. Objective

The main objective of CPEP is to assure the availability of qualified doctoral level personnel to direct medical microbiology or immunology laboratories of the United States or elsewhere to provide quality health services to the public. In the United States, training in CPEP-accredited programs is a pathway to qualification for Board examination and certification that qualifies medical microbiologists (American Board of Medical Microbiology [ABMM]) or immunologists (American Board of Medical Laboratory Immunology [ABMLI]) as laboratory directors based on CLIA (Clinical Laboratory Improvement Act) laws.

3.2. Responsibilities

3.2.1. Training Standards

CPEP establishes the standards of training at the postgraduate level in medical and public health laboratory microbiology, medical laboratory immunology, and other specialties designated by CPEP and approved by the College. CPEP has the major responsibility for preparing and updating the Essentials, for all accreditation decisions, and for evaluating the validity and reliability of its standards. Although accredited programs must meet the stated requirements in the Essentials and strive toward common objectives, CPEP encourages experimental and innovative approaches in reaching the program objectives provided that they ensure the quality and integrity of the training.

3.2.2. Document Review/Revision

Revisions to the Essentials and Operational Procedures will be made every three years by three practicing microbiologists/immunologists who are ABMM/ABMLI Diplomates. A CPEP
member will chair the review.

3.2.2.1. Essentials Microbiology

Every other review will be made by a minimum of six ABMM Diplomates. Composition of the group will be the following:

- one to two recently certified Diplomates
- one to two five-year-certified Diplomates
- one to two 10-year-certified Diplomates
- one to two 20-year-certified Diplomates

All reviewers will review the administrative (non-science) sections as well as the science sections. The chairs of the microbiology and immunology reviewing groups will compile their reviewers’ feedback on the administrative sections and work together to make those revisions.

3.2.2.2. Essentials Immunology

Every other review will be made by a minimum of six ABMLI Diplomates. Composition of the group will be the following:

- one to two recently certified Diplomates
- one to two five-year-certified Diplomates
- one to two 10-year-certified Diplomates
- one to two 20-year-certified Diplomates

All reviewers will review the administrative (non-science) sections as well as the science sections. The chairs of the microbiology and immunology reviewing groups will compile their reviewers’ feedback on the administrative sections and work together to make those revisions.

3.2.3. Program Review/Assessment

CPEP carefully reviews and assesses postgraduate fellowship programs in institutions that apply for CPEP accreditation and determine by applications and site visits whether the programs comply with the Essentials established by CPEP.

CPEP members are assigned specific accredited training programs and are required to provide an annual review of each program. This involves review of the annual report and communication with the Program Director to determine if CPEP can assist with any issues.

3.2.4. Listing of Accredited Programs

A list of CPEP-accredited fellowship programs will be maintained on the ASM website.

3.2.5. Communication

CPEP fosters communication among the directors of CPEP-accredited programs in an effort to continue to improve the quality of fellowship programs.
3.3. Membership

3.3.1. Membership

The CPEP Chair will appoint a minimum of seven voting members to CPEP, one of which must be a CPEP Program Director. The term of appointment is three years. Members may serve no more than two consecutive three-year terms. All members of CPEP will be experienced, board certified (ABMM or ABMLI) medical microbiologists or immunologists who represent various subspecialties of the field and are considered active status by their respective board.

Member responsibilities include i) attendance at the annual CPEP meeting, ii) annual review of assigned programs, iii) on-site inspection of programs, and iv) review/revision of the Operational Procedures and/or Essentials.

3.3.2. Chair

The Dean of the College appoints the Chair of CPEP. An individual may serve no more than two consecutive three-year terms as CPEP Chair. The CPEP Chair is a member of the Board of the College.

If the CPEP Chair is unable to complete her/his term, s/he would recommend a replacement to fill the remaining term to the Dean. The Dean makes the appointment with the approval of the College Board.

3.3.3. Ad hoc Committees

The CPEP Chair may appoint ad hoc committees as needed to handle appeals and complaints, review and revision of the Essentials and Operational Procedures, and other appropriate tasks.

3.3.4. Voting

CPEP decisions granting accreditation or reaccreditation are based on a favorable vote of at least two-thirds of the total voting membership (including the Chair) at meetings, by conference calls or mail ballot. In the case of a tie vote, the Chair will make the final decision. To conduct business at a meeting, a majority of its voting membership constitutes a quorum. Any member of CPEP who has a direct relationship with a program may not engage in discussion of that program and may not vote on decisions affecting its accreditation status. Questions relating to whether a relationship is direct or not will be resolved by the CPEP Chair.

3.4. Budget

CPEP submits an annual budget to the Board of the College for approval.

4. Procedure for Initial Program Accreditation and Reaccreditation

4.1. Reaccreditation Notification

Twelve months before the end of the seven-year accreditation period, CPEP staff notifies the Program Director that an application for reaccreditation must be submitted approximately nine months before the designated expiration date. Other information included in the letter concerns the self-study, the date the current accreditation period ends, the date for submitting the application, and the accreditation fee. The
Program Director’s institution is responsible for the site visit team’s expenses. A copy of the letter is sent to the CPEP Chair.

In addition to considering the application for reaccreditation, including a separate summary of results of a current self-study and report of the site visit, Committee members review all previous comments and recommendations concerning the program, the annual reports, and the record of attendance at meetings of the Director of accredited programs. The Committee’s decision on reaccreditation is reached according to the procedure outlined in Sections 4.3.1.3 and 4.3.2.3.

4.2. Application for Accreditation or Reaccreditation

4.2.1. Regard for Decisions of Other Accrediting Agencies

The sponsoring and collaborating institutions must be accredited by the Joint Commission, The College of American Pathologists or the Health Care Financing Administration of the Department of Health and Human Services as appropriate.

4.2.2. Accreditation Application

Officials of the program seeking accreditation are provided an accreditation application form and a copy of 1) the Operational Procedures; 2) the Essentials; 3) ASM’s Code of Ethics; 4) a list of current CPEP-accredited programs; and 5) information about the self-study process (Appendix 2).

4.2.3 Submission of Application

A complete application consists of —

- A completed application form, including biographical information of principal staff members
- A statement which affirms adherence to the ASM Code of Ethics
- A statement outlining the program’s training rotation objectives
- A statement which attests that the institution fosters nondiscriminatory practices in the admission and treatment of Fellows and the employment of staff
- A statement which affirms to payment of the administration fee and site visit team’s expenses
- A self-study. The purpose of the self-study is to define the strengths and weaknesses of the program. It is conducted by program personnel and is a critical evaluation of the institution’s program and facilities in relation to the Essentials. Personnel make necessary adjustments to comply as closely as possible with the established requirements. A summary of the study method and its results is included with the application for accreditation.

4.2.4. Receipt of Application

CPEP staff acknowledges receipt of the application and forwards it to the CPEP Chair, who reviews the application. If necessary, the CPEP Chair may contact the Program Director to request additional information or documentation. When the application is determined to be complete by the CPEP Chair, CPEP staff sends copies of the application and eligible for site visit ballots to the Committee for review.
4.3. Process of Reviewing Applications for Accreditation/Reaccreditation

4.3.1. Application Review Period

4.3.1.1. Length of Period

The application review period, from receipt of the application to Committee decision, is approximately three months.

4.3.1.2. Committee Review

Committee members review the application thoroughly and send their written comments to CPEP staff. Correspondence may ensue between the CPEP Chair and the applicant program to clarify points the Committee raises.

4.3.1.3. Committee Decision

The Committee may decide one of the following:

1. Declare the program eligible for a site visit, having noted no major deficiencies.

2. Deficiencies are noted. CPEP Chair discusses deficiencies with Program Director. Deficiencies are resolved in writing to the satisfaction of the CPEP Chair. Ballots are sent to Committee members for a re-vote.

3. Declare the program ineligible for accreditation (site visit). A program that fails to achieve eligible status for a site visit is ineligible for accreditation. The CPEP Chair will notify the Program Director and the institution's Program Department Chair (or appropriate administrative officer) in writing, stating the reasons for this decision. The CPEP Chair will indicate that the decision may be appealed as outlined in Section 6.

4.3.2. Site Visit Period

4.3.2.1. Notification

If no major deficiencies have been noted during the initial review of the application, the program is declared eligible for a site visit. The CPEP Chair notifies the Program Director/applicant and schedules a site visit to be conducted within approximately three months of this notification.

4.3.2.2. Site Visit

The Chair selects a site visit team and appoints a team leader. The team consists of at least one current CPEP member. Site visit team members cannot have current, active scientific collaborations with the program faculty and must not have matriculated from the program within the previous five (5) years. At most, only one site visit team member may have matriculated from the program. The Director of the applicant program is given the opportunity to object to proposed members of the site visit team if the Director perceives potential conflict of interest.

The site visit requires 1 to 1.5 days. The team usually arrives about 8:30 a.m. and leaves by 1:00 p.m. the following day. The CPEP team leader contacts the Program Director and arranges the dates of the site visit. The leader confirms the
The team leader notifies CPEP staff of the site visit dates. CPEP staff emails the Program Director and site visit team the pertinent site visit materials.

The schedule of appointments during the visit is the responsibility of the Program Director following the suggestions of CPEP described in Appendix 3. The schedule should be arranged after consultation with the site visit team leader to afford the team the best opportunity of becoming well acquainted with the program and the facilities. Advanced planning may be necessary to schedule current Fellows or recent graduates of the program. At the end of the visit, the team discusses its findings with the Program Director and faculty in an open meeting. All deficiencies and recommendations should be addressed at this meeting. A list of deficiencies and recommendations can be left with the Program Director.

The leader of the site visit team completes the report of the site visit and summarizes the findings, including deficiencies and recommendations, within 30 days. This summary should mirror the report presented to the Program Director and faculty. This information is given to the CPEP Chair for consideration by the Committee.

The applicant program is responsible for all of the site visit team’s expenses associated with the site visit. ASM will reimburse members of the site visit team after the visit and submission of a completed expense report and receipts and then invoice the applicant program for expenses and the $2,400 accreditation fee. Accreditation will not be granted until payment is received.

4.3.2.3. Committee Decision

1. If the site visit team reports no deficiencies, the CPEP Chair sends a letter to the Program Director summarizing the findings. The site visit team report is also circulated to CPEP members with an “approved/not-approved for accreditation” ballot. CPEP members must vote within 30 days. A teleconference may be arranged if necessary.

2. If the site visit team finds that the program is not in full compliance with the Essentials, the CPEP Chair writes to the Program Director within 30 days. The Chair presents the team’s report, summarizes recommendations for changes that must be made, and summarizes suggestions for improvements to the program. Suggestions for improvement are distinct from required (recommended) changes. The Program Director must reply, in writing, within 60 days and respond to the recommendations and suggestions indicating a time schedule within which satisfactory resolution of deficiencies can be expected.

3. The Committee reviews the site visit report and the responses from the Program Director. After separately evaluating available information in relation to the Essentials, each CPEP member votes in writing or by teleconference on whether to accredit the program. Members are asked for supporting comments on their decisions. If a favorable vote of at least two-thirds of the voting membership is obtained, the program is offered accreditation.
5. Accreditation Period

5.1. Administration

5.1.1. Notification

If CPEP votes for accreditation, the CPEP Chair notifies the Program Director in writing that the program has been officially accredited by CPEP. The date of initial accreditation or reaccreditation of the program is the date of the letter from the CPEP Chair.

5.1.2. Certificate of Accreditation

An official certificate is issued by the American College of Microbiology to the Program Director.

5.2. Length of Period

Postgraduate training programs in medical microbiology or medical immunology are accredited for seven years.

5.3. Revocation of Accreditation

The accreditation certificate remains the property of the College and, upon the recommendation of CPEP and after due process, CPEP may revoke the accreditation and request return of the certificate.

5.4. Maintaining Accreditation

Maintenance of CPEP accreditation is contingent upon meeting the following requirements.

5.4.1. Changes in Directorship or Staff

Notification of any changes in the directorship or other required staff must be sent immediately to CPEP staff. Suitable replacements should be obtained within six months.

5.4.2. Submission of Annual Report

Each program submits an annual report (Appendix 4). The annual report must include such information as significant changes in program, facilities, senior staff, any accrediting agencies’ actions concerning the program, and addition or deletion of major service areas; biographical information on new staff members, biographical information (including publications and presentations) on graduates who have completed one or two years of the training program during the preceding year; and names of any individuals who did not complete a satisfactory period in the program as well as reasons for the termination; the number of applicants to the program for the current year; and the name(s) of trainee(s) selected. In addition, the annual report should include minutes from the Advisory Committee meeting (see Essentials 2.3.12) and critiques from current fellows.

5.4.2.1. Annual Review by CPEP

CPEP reviews information in the annual report submitted by each Program Director. CPEP reserves the rights to request additional information from a Program Director at any time and, if needed, to conduct a site visit. The necessity for a site visit will be voted on by the Committee and will be at CPEP’s expense.
5.4.3. **Attendance at Directors' Meeting**

Programs are required to send a representative to the annual CPEP Program Directors' meeting, which is held at the ASM General Meeting. If a representative is not available, CPEP staff should be notified by the Program Director or his/her designee in advance of the meeting.

6. **Appeals and Complaints**

Institutions and individuals having concerns about CPEP decisions or the quality of CPEP-accredited postgraduate programs can use recourse procedures described below. The College will use its influence to protect the interests and status of the Fellows at the institution through a formal appeals process.

6.1. **Appeal of Committee Decisions**

6.1.1. **Written Appeal**

An appeal of an adverse CPEP decision (e.g., failure to achieve eligibility status, denial of accreditation) must be submitted 30 days from the date of the notice of CPEP's decision. The appeal must be in writing and sent to CPEP staff. The letter must contain the basis of the appeal.

6.1.2. **Formation of ad hoc Appeals Committee**

Within 30 days of receipt of the letter, the CPEP Chair will refer the issue to the Dean of the American College of Microbiology who will appoint one chair and two members to serve on an ad hoc Appeals Committee. Those appointed will be familiar with the Essentials and Operational Procedures but will not be members of CPEP or have a current or past relationship with the appellant program. The Program Director is given the opportunity to object to proposed members of the ad hoc Appeals Committee.

6.1.3. **Complete Statement of Case**

The appellant has 30 days from the date of the initial appeal letter to submit a complete statement of the case.

6.1.4. **Review by ad hoc Appeals Committee**

The ad hoc Appeals Committee reviews the case and schedules a hearing or teleconference for the appellant before the ad hoc committee. Appellants have the right to be represented by counsel and are responsible for any expenses incurred. Upon request, an appellant may waive the hearing or teleconference.

6.1.5. **Report to CPEP**

Within 60 days of receipt of the complete statement of the case, the ad hoc Appeals Committee provides a report and decision to the Dean of the College.

1. If the ad hoc Appeals Committee concludes that CPEP has acted unjustly, the adverse action will be dropped.

2. If the ad hoc Appeals Committee concludes that the adverse decision by CPEP was justified, it will so indicate.

3. The decision of the ad hoc Appeals Committee is final.
6.1.6. Notification by CPEP

Within 30 days of receipt of the *ad hoc* Appeals Committee’s report, the CPEP Chair will communicate the decision of the *ad hoc* Committee to the Program Department Chair (or appropriate administrative officer) and the Program Director. The communication will include a statement of specifics considered in the case and the *ad hoc* Appeals Committee’s conclusion.

6.2. Complaint Regarding Conduct or Quality of Program

6.2.1. Written Complaint

If a postgraduate Fellow has a complaint on the conduct or quality of a program that has been accredited by CPEP, the Fellow may file an official, written complaint with the CPEP Chair or CPEP staff. A Fellow must discuss the issue(s) with the Program Director prior to submitting the complaint.

6.2.2. Attempted Resolution of Complaint

Through correspondence or discussion with the complainant and the Program Director, the CPEP Chair will, within 60 days, attempt to facilitate resolution of the issue.

6.2.3. Formation of the Complaint Subcommittee

If the complaint cannot be resolved in this manner, the CPEP Chair appoints three CPEP members to a Complaint Subcommittee consisting of one chair and two members. None of the members may have a past or current association with the program under scrutiny or the Fellow. Both the Fellow and Program Director are given the opportunity to object to proposed members of the Complaint Subcommittee.

6.2.4. Review by the Complaint Subcommittee

The Complaint Subcommittee obtains and reviews relevant information bearing on the complaint from the Fellow, the Program Director, and other sources. If requested by the Fellow, Program Director, or by decision of the Complaint Subcommittee, the Chair of the Complaint Subcommittee may schedule a teleconference or hearing at a mutually agreed upon place and time. The Fellow, Program Director, and other witnesses will be responsible for their own expenses incurred during the hearings.

6.2.5. Report to CPEP

The Complaint Subcommittee will complete its deliberations within 60 days of its appointment and submit a report with conclusions to the CPEP Chair. The decision of the Complaint Subcommittee is final.

6.2.6. Notification by CPEP

Within 30 days of receipt of the Complaint Subcommittee's report, the CPEP Chair will communicate its conclusion to the complainant, the Program Department Chair (or appropriate administrative officer) and Program Director. The communication will include a statement of specifics considered in the case and the subcommittee's conclusion.

1. If it is determined that the CPEP-accredited program has not provided satisfactory training opportunities to the Fellow (the complainant), the CPEP Chair requests the Program Director to submit evidence of corrective action. A copy of this request is
sent to the Fellow and the Program’s Department Chair or appropriate administrative officer.

2. If it is decided that the CPEP-accredited program has been conducted in a satisfactory manner, the CPEP Chair so informs the complainant and others concerned.
Appendix 1. Self-Study for Initial Accreditation or Reaccreditation

GUIDELINES FOR SELF-EVALUATION

A. Introduction

Postgraduate training programs seeking initial accreditation or reaccreditation by the American College of Microbiology, Committee on Postdoctoral Educational Programs (CPEP), are required to conduct a self-assessment study as a part of the application process. Institutions applying for initial accreditation or reaccreditation of their programs are encouraged to obtain and review the Essentials as well as other literature available from CPEP prior to conducting their self-assessment studies.

The process of self-evaluation is an effective mechanism through which educational programs may identify their strengths and weaknesses. It is primarily an in-house investigation and analysis conducted by the institution for internal use in determining how the institution can meet, and hopefully, exceed the requirements in the Essentials. The findings obtained through this process will allow the educational program to make appropriate corrections or adjustments in the program or maximize the education of students and the efforts of the participating institutions and staff.

Self-evaluation is one of the most critical aspects of the accreditation or reaccreditation process. When conducted properly, such a study may require several months for completion, depending upon the complexity of the educational program.

Existing CPEP-approved programs are accredited for seven-year periods. Each is advised of the need for reaccreditation nine to twelve months prior to the expiration of its current term of accreditation. Such approved programs perform continuous self-evaluations and should conduct a formal self-evaluation study six months in advance of submitting their applications for reaccreditation.

B. Purpose of the Self-Evaluation Study

When completed, the self-assessment study should represent a qualitative assessment of the current and future educational program. The study should determine: What are the postgraduate program’s educational goals? How are these goals being met? How can the participating institution(s) more effectively attain these goals?

The self-evaluation process should involve all components of the program and be conducted by several individuals involved in the educational program. The study should determine how the program is meeting (or will meet) the requirements as established in the Essentials to provide the necessary training for students specializing in medical microbiology or laboratory immunology.

It is recognized that a self-assessment study performed prior to initial accreditation will not be as extensive as that performed by those programs seeking reaccreditation. When performed by programs seeking reaccreditation, the self-evaluation study should represent a qualitative assessment of each facet of the program that contributes to the realization of the program’s educational objectives.
C. **Task Force**

A task force should be established by the Program’s Director to conduct the self-assessment study and to compile the resultant report. Members of this committee should be selected carefully so that all components of the training program are represented. It is suggested that the following individuals be selected to serve on this self-evaluation committee:

1. Program Director;
2. Representative from the institution’s administration (university and/or hospital);
3. Selected staff from the parent and affiliated institution(s); (i.e., university, hospital, public health laboratory);
4. Bench-level laboratory instructors and laboratory supervisors; and
5. Representatives of current students and program graduates (if available).

In certain instances, complex educational programs such as those comprised of several collaborating institutions should establish subcommittees to properly assess the quality of all educational components. It is suggested that a small steering committee composed of the Program Director and one or two other persons be drawn from the task force. This committee should plan the work, establish dates for meetings of the task force, for periodic reports and for completion of the study, and assist in writing the final report (application).

D. **Purpose of the Task Force**

The task force will both guide and participate in the gathering of necessary information for the self-assessment study and for preparation of the program’s application to CPEP. Specifically, the task force should:

1. Review and clarify the program’s educational objectives;
2. Evaluate the elements and facilities available to meet the program’s objectives;
3. Assist in the preparation of segments of the program’s application for accreditation; and
4. Review and approve the application to CPEP. (Usually the Program Director will assume the major responsibility for preparing the first drafts of the application.)

E. **Areas of Concern to be Addressed During the Self-Evaluation**

The self-evaluation task force should assess the quality of all components of the training program. Past students and staff members not part of the task force should be asked to provide contributory information and opinions on the strengths and weaknesses of the program.

1. **Philosophy and Goals**

What health manpower need is being met by this program? Are graduates filling the types of positions visualized for those completing the program? What are the overall program objectives and what knowledge
and skills are students expected to derive from the major segments of
the program (e.g., from bench rotating, the public health laboratory
assignment, work with infection control committee)?

2. Administration

The task force should determine the level of institutional support
rendered to the program. Are sufficient resources available for the
continued support and development of the program? Is support available
for possible future changes? Is the administration of the program
sufficiently well-organized to provide maximal collaboration among all
components of the educational program and to provide the student with
an optimal education experience? How is the progress of students
evaluated in reference to the goals and objectives?

3. Facilities

Are sufficient facilities available to adequately support the student in each
phase of the education program? Are institutional facilities such as the
library, hospital, or public health laboratory sufficient in size to
accommodate student activities? If not, what alternatives are available?
Are the specimen loads adequate for each specialty of microbiology? If
not, how are students to obtain the necessary experience to develop
competence? Is space provided to students to store educational
materials and to study?

4. Staff

Do staff members possess appropriate credentials to meet the
requirements in the Essentials and for the education and training of the
students? Are all participating staff members sufficiently informed as to
the educational objectives? Is sufficient staff available for the education
of students?

5. Student Selection and Evaluations

Is the selection of students conducted in an orderly and efficient manner?
How are students selected? Is this process optimal? Should it be
changed or modified? Are records maintained of the selection process?
Where are students selected from? Are students evaluated regularly?
Are records of students’ evaluations and records maintained?

6. Training Program (Curriculum)

Are educational objectives established for the overall program and its
major segments? Does the curriculum match the program’s educational
objectives? If deficiencies are identified, how can they be optimally
corrected? How well does the curriculum meet the needs of current
students? In the opinion of past graduates, what aspects of the program
should be improved? What areas need attention? What aspects were
unnecessary? How is the progress of a student assessed? Is it optimal?
Are sufficient educational materials available? What other materials or
methods for student education are available?

7. Special Notes
In considering the above (and other) areas of review, the task force should compare its findings with the requirements established for postgraduate training programs in medical microbiology or laboratory immunology as outlined in the Essentials. Every effort should be made to meet or exceed the requirements in each specialty area (i.e., microbiology, mycology, parasitology, virology, immunology) for which CPEP accreditation or reaccreditation is being sought.

F. Decisions and Development of Final Report for Incorporation into the Application

Information obtained through the self-evaluation process should form the basis of much of the material which is incorporated into the application for accreditation/reaccreditation. At a minimum, the composition of the task force, the number of meetings briefly stating how the self-analysis was conducted, and the results of the analysis relative to major strengths and weaknesses of the program should be included in the application.
Appendix 2. Site Visit Team Leader’s Checklist

PRIOR TO THE INSPECTION

- Schedule inspection with Program Director
- Notify other inspector(s) of inspection date
- Arrange hotel accommodations at inspection site with Program Director or assistant
- Make airline reservations
- Review program packet/discuss with fellow inspector(s) if necessary
- Arrange the following with the Program Director
  - Room or quiet place/workroom for paperwork review and discussion
  - Paperwork includes lab/hospital accreditation certificates (e.g., CAP)
  - Letters of agreement with collaborating institutions (e.g., state health departments)
  - Request needed manuals/paperwork/etc. be placed in workroom
  - Provide titles of persons needed for interviews - schedule of interviews
  - Arrange for in-person or phone interview with recent program graduate
- Take CPEP staff and CPEP chair’s phone numbers for contact during the inspection if necessary
- Take a copy of the Operational Procedures and the Essentials for reference

AT THE TIME OF INSPECTION

- Tour of facility
- Begin interviews (multiple inspectors may interview separately if time is short)
- Review paperwork first day
- Request additional paperwork, if missing, for examination on day 2
- Request additional interviews if necessary
- Finish inspection morning of day 2
- Prepare inspection summary for presentation to Program Director (and as many faculty as possible)
- Discuss strengths of program, deficiencies that must be corrected, and suggestions (that may or may not be implemented)
- Leave a written outline of summary report

AFTER RETURNING FROM INSPECTION

- Prepare a letter for the CPEP Chair summarizing inspection results. This letter should include strengths of the program, deficiencies (listed by item in the Essentials) and suggestions. This letter is sent to the CPEP staff.
Appendix 3. Suggested Personnel to Be Interviewed During an Accreditation or Reaccreditation Site Visit Inspection

1. Program Director. The Program Director should also have the records of current trainees and past graduates of the program available for review by the site visit team.

2. Department Chair and/or appropriate Administrative Officer(s). In particular, the individual(s) responsible for Fellows' funding should be interviewed.

3. Instructional Faculty, both program and non-program, responsible for major areas of Fellows' training such as:

<table>
<thead>
<tr>
<th>MICROBIOLOGY TRAINING PROGRAMS</th>
<th>IMMUNOLOGY TRAINING PROGRAMS</th>
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<tbody>
<tr>
<td>Bacteriology</td>
<td>Infectious Disease Serology</td>
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<td>Research</td>
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<td></td>
<td>Training Methodology</td>
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</table>

4. Clinical laboratory supervisors involved in Fellows' training. These individuals may be interviewed as a group.

5. For reaccreditation: Fellows enrolled in the early and final phases of the program.

6. For reaccreditation: One or more former graduates of the program if available (it is desirable to interview graduates who finished during the accreditation period just ending).
Appendix 4. Annual Report Form

ANNUAL REPORT FOR POSTGRADUATE TRAINING PROGRAMS
IN MEDICAL AND PUBLIC HEALTH MICROBIOLOGY OR
MEDICAL LABORATORY IMMUNOLOGY
2014-2015

Committee on Postgraduate Educational Programs (CPEP) of the American Society for Microbiology

In fulfillment of continued accreditation by CPEP.

Institutional Sponsor of CPEP training program: ___________________________

Program Director: __________________________

Address: __________________________

Tel: __________________________

Fax: __________________________

E-mail: __________________________

Section I

1. Have there been any changes in administrative personnel or faculty affiliated with the training program? If yes, please provide detail.

   No ___

   Yes ___

2. Have there been any funding changes in the past year? If yes, please provide detail.

   No ___

   Yes ___

3. Have there been any changes in training facilities (space, equipment, supplies) over the past year? If yes, please provide detail.

   No ___

   Yes ___

4. Have there been any changes in curriculum or areas of training in the past year? If yes, please provide detail.

   No ___
5. In your opinion, have changes to the program (if any) improved or detracted from the quality of training? If there was an adverse effect, please provide detail.

    Improved ___
    No change ___
    Detracted ___

Section II

1. Number of Fellows currently enrolled ___

2. Name, start date, and expected completion date of first year Fellow(s)

3. Name, start date, and expected completion date of second year Fellow(s)

Note: A record of completed rotations must be submitted for each Fellow along with a brief description of research projects and publications/presentations generated during the past training year.

4. Did any Fellows leave your program prior to completion during the past year? If yes, please provide detail.

    No ___
    Yes ___

5. List Fellows who have completed training (within the past year) and their current employer.

   Name:
   Current Employer:
   Job Title:
   Address (city and state):
Name:

Current Employer:

Job Title:

Address (city and state):

6. Have monies been appropriated for incoming and existing Fellows for the next training year?
   No ___
   Yes ___

7. In your opinion, is your training program in compliance with the Essentials of training? If not, please provide a detailed explanation.
   No ___
   Yes ___

Provide any recommendations for revisions to the Essentials and Guidelines for training. Also detail any difficulties you have encountered maintaining compliance with the Essentials. If you have resources to offer other CPEP programs in the form of training materials and/or on-site instruction, please provide a list of those resources.

SECTION III
Under separate cover to the CPEP staff, have all current Fellows provide a brief and unencumbered critique of the training program based on their experiences.

SECTION IV
Submit Advisory Committee meeting minutes.

Essentials 2.3.12 states, “An advisory committee must be composed of key program officials from the parent and collaborative institutions. The purpose of this committee is to review and establish policy, continuing program development and evaluation, and to help maximize utilization of resources at the sponsoring and collaborating institutions. At least one meeting each year must be held to assess the program. More frequent meetings may be necessary to resolve certain issues that arise during the year. Minutes of these meetings must be prepared and submitted to CPEP.”
**SECTION V**

Please use the scale of 1 (strongly agree) to 10 (strongly disagree) for your responses.

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<thead>
<tr>
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<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
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<td><strong>Strongly agree</strong></td>
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<td>The <em>Essentials</em> are reflective of current laboratory practice.</td>
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<td>CPEP is available for counsel if needed.</td>
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<td>I am pleased with ASM’s administration of CPEP.</td>
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<td>Additional comments for ASM.</td>
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Please submit your completed report to Peggy McNult by September 1, 2017. You may email the form to Peggy at certification@asmusa.org.

Fellows should also submit their critiques to Peggy by September 1.
Section VI – Medical Microbiology Training Summary
A signed training summary must be completed and verified by both the Program Director and the Fellow. You can fax it to 202-942-9353 or mail it to ASM, CPEP, 1752 N St, NW, Washington, DC 20036, Attn: Peggy McNult. Or you can scan it, attach it to an email, and send it to certification@asmusa.org.

Name of Fellow: ____________________________________________  Training Program: _________________________________________
Inclusive Training Dates (month/year): From ____ / ____ to ____ / ____
Signature of Director: _____________________________________________  Signature of Fellow: _________________________________________

<table>
<thead>
<tr>
<th>DISCIPLINE</th>
<th>TRAINING METHODS</th>
<th>TRAINING WITHIN THE DISCIPLINE</th>
<th>COMMENTS REGARDING TRAINING:</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Approximate percentage of effort:</td>
<td>Check all that apply to the training given in each category:</td>
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<td></td>
<td>Duration (weeks)</td>
<td>Bench, Practical, or Clinical Experience (%)</td>
<td>Didactic Training (%) (a)</td>
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<tr>
<td>Bacteriology (b)</td>
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<tr>
<td>Mycology &amp; Mycobacteriology (b)</td>
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<td>Clinical Infectious Diseases</td>
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<td>Laboratory Management (c)</td>
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<tr>
<td>Clinical Communication (d)</td>
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<tr>
<td>Research</td>
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(a) Instruction such as lecture or formal discussion (estimate percentage of effort using a 40-hour week as a denominator)
(b) Including identification, antimicrobial susceptibility testing, and antibiograms
(c) Including laboratory safety, management, regulations, QA/QC, proficiency testing, automation/instrumentation, and specimen collection
(d) Including clinical consultation and direct communication with physicians regarding laboratory results, troubleshooting, problem-solving, and testing issues
Section VI – Laboratory Immunology Training Summary
A signed training summary must be completed and verified by both the Program Director and the Fellow. You can fax it to 202-942-9353 or mail it to ASM, CPEP, 1752 N St, NW, Washington, DC 20036, Attn: Peggy McNult. Or you can scan it, attach it to an email, and send it to certification@asmusa.org.

Name of Fellow: ____________________________________________ Training Program: _________________________________________
Inclusive Training Dates (month/year): From ____ / ____ to ____ / ____
Signature of Director: _____________________________________________  Signature of Fellow: _________________________________________

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<td>Duration (weeks)</td>
<td>Bench Experience</td>
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<td>Infectious Disease Serology</td>
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<td>Autoantibody Testing</td>
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<td>Histocompatibility Testing</td>
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<td>Transplant Immunology</td>
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<td>Immunoglobulin Analysis</td>
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<td>Molecular Biology</td>
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<td>Public Health Serology</td>
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<td>Soluble Tumor Markers</td>
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<td>Immunodeficiency Disorders</td>
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<td>Allergy Testing</td>
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<td>Laboratory Management*</td>
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<td>Research Methodology</td>
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<td>On-Call**</td>
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<tr>
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</table>

*Instruction such as lecture or formal discussion. (Please estimate percentage of effort using a 40 hour week as a denominator.)

* including laboratory safety, management, regulations, quality assurance, proficiency testing, automation/instrumentation, and specimen collection

** including clinical consultation and direct communication with physicians regarding laboratory results and issue
Appendix 5. Monitoring CPEP Programs

The CPEP Operational Procedures state that members of CPEP “…are assigned specific accredited training programs to provide annual review. This involves review of the annual report and communication with the Program Director to determine if CPEP can help with any issues.” Therefore, each CPEP member is assigned one or two programs to monitor each year. This communication provides information for members to use as they monitor their assigned CPEP programs.

The purposes of monitoring are the following:

- To help CPEP become aware of program-related problems and issues with which CPEP can provide help
- To help Program Directors facilitate resolution of problems and issues
- To assure Program Directors that CPEP supports the programs and is always available to help with problems and to improve the quality of the programs

Monitoring should not be a burden on members or Program Directors. Monitoring is not intended to be, should not be performed as, and should not be interpreted as any type of disruption, intrusion, inquisition, or micro-management.

Members are encouraged to contact the Directors of their assigned programs in the spring. This way the most recent significant activities (i.e., those too recent to have been included in the annual reports submitted in September) can be reported at the annual CPEP meeting in the spring.

During informal discussions with Program Directors, members can ask simple questions, the answers to which can help members determine the status of their assigned programs and what to report at the annual CPEP meeting. The following are examples of questions to help members have productive and non-confrontational conversations with Program Directors. Members may use any of these questions or others which they deem appropriate. For the most part, detailed answers to these questions are not usually provided in the annual report forms that the Program Directors are required to submit each year.

1. Has the required annual report from the Program Director been completed and submitted to CPEP staff?
2. Are there any unresolved issues which were detected during the previous site visit? Have these issues been resolved? If not, how and when might these issues be resolved? (Note: Such issues can be found in the inspection report from the previous on-site visit.)
3. Were any significant changes in the program made within the last year?
   - curriculum
   - training opportunities and educational components of the program
   - logistical aspects or administrative organization in the program
   - funding for the program
4. How are the Fellows doing?
   - Are the Fellows making progress?
   - Have any new Fellows been accepted for the next year?
   - What is the status of the current Fellow(s)?
   - Are any of the Fellows not working out?
   - What is the employment status of the most recent graduate of the program?
   - How are the Fellows’ research projects going?
   - Has any of the Fellows’ research been published? Abstracts?
   - Have Fellows attended any scientific meetings during the last year?
5. What is the status of any problems or inconsistencies of which the member is aware?

6. Do you (the Program Director) see any problems with the Essentials or Guidelines for Self-evaluation or ways they can be improved?

7. What is your opinion of current or future job market for the current Fellows and future graduates of your program or other programs?

8. How can CPEP help you?

At the annual CPEP meeting, members briefly present their assigned programs’ annual reports and any significant findings which resulted from discussions with Program Directors.