Section 1: Introduction

Purpose
This Policy describes the process for accreditation of Master of Genetic Counselling programs by the Human Genetics Society of Australasia (HGSA), including minimum requirements, application for accreditation and re-accreditation, and the assessment process.

The accreditation process has been established to ensure minimum standards of education and training for people entering the genetic counselling profession in Australasia. Graduation from an accredited program is a requirement for eligibility to undertake certification in genetic counselling and employment as a genetic counsellor in Australia and New Zealand.

The HGSA accredits programs on advice from the Accreditation Committee of the HGSA Board of Censors (BoC) for Genetic Counselling. The Certification Committee of the BoC oversees the certification of genetic counsellors in Australasia.

The Accreditation Committee may periodically alter the Policy to reflect changing requirements for genetic counselling practice. This Policy supersedes all previous guidelines.

A list of accredited programs can be found on the Accreditation Committee page on the HGSA website.

Background

Genetic counsellors
Genetic counsellors are allied health professionals who work with individuals and families to help them understand and adapt to the medical, psychological, familial and reproductive implications of the genetic contribution to specific health conditions.
The process of genetic counselling integrates the following (National Society of Genetic Counselors 1995–2006):

- interpretation of family and medical histories to assess the chance of disease occurrence or recurrence
- education about the natural history of the condition, inheritance pattern, testing, management, prevention, support resources and research
- counselling to promote informed choices in view of risk assessment, family goals, and ethical and religious values
- support to encourage the best possible adjustment to the disorder in an affected family member or to the risk of recurrence of that disorder.

In Australasia, genetic counsellors work in partnership with clinical geneticists or other medical specialists, often as part of a multidisciplinary team that may include other health professionals, such as nurses, social workers and scientists.

FHGSA certified genetic counsellors have a Master’s degree in genetic counselling and a minimum of three years of clinical experience.

### Key terms

MHGSA: Member of the HGSA (Genetic Counselling), tertiary-trained health professionals whom the Certification Committee has determined fulfil the eligibility requirements to undertake HGSA certification in genetic counselling.

FHGSA: Fellow of the HGSA (Genetic Counselling): tertiary-trained health professionals with specialist training in genetics and counselling, certified by the HGSA in genetic counselling.

The HGSA recommends that genetic counselling be conducted by appropriately trained professionals to maintain high standards and consistency (Human Genetics Society of Australasia, 2008).

To ensure a high standard of practice the HGSA:

- Assesses competency as a genetic counsellor. On demonstration of full competence, HGSA certification in genetic counselling is awarded. The requisite skills and competencies are defined by the HGSA Practitioner Certification for Genetic Counsellors Policy and HGSA Competency Standards for Genetic Counsellors Policy.
- Conducts a Continuing Professional Development (CPD) program for genetic counsellors described in the HGSA Continuing Professional Development for Genetic Counsellors Policy.

A two-year clinical Master of Genetic Counselling from a program accredited under the HGSA Accreditation of Masters of Genetic Counselling Programs Policy is considered by the HGSA to be sufficient for employment in an entry-level position and is a requirement for certification (HGSA Practitioner Certification for Genetic Counsellors Policy).

### Governance

The BoC is a committee of the Human Genetics Society of Australasia. The Accreditation Committee of the BoC assesses applications for course accreditation and makes recommendations to the Council of the HGSA, which grants accreditation to genetic counselling programs.

In 2008 the BoC, together with the Australasian Society of Genetic Counsellors (ASGC), and with the approval...
of the HGSA Council, established an Oversight Committee to oversee the review of the process of certification in genetic counselling and to substantially revise the training guideline document. Further details of this process can be found in the HGSA Practitioner Certification for Genetic Counsellors Policy. During 2009 the Oversight Committee established a working party to develop an accreditation process. The accreditation processes applied or proposed in the USA and UK, respectively, were reviewed. The course convenors of existing courses and those proposing to establish courses were consulted prior to writing the initial draft of the accreditation document. Further consultation occurred with these people and the ASGC during the drafting process. The BoC drew extensively on the documentation of the American Board of Genetic Counselling (www.abgc.net) describing accreditation of graduate programs in genetic counselling (see: https://www.gceducation.org/).

How to use these Course Accreditation Guidelines

There are six sections and two appendices, as follows:

- Section 1: Introduction – provides information about genetic counselling and certification
- Section 2: Accreditation – explains accreditation and the processes for application, assessment, appeals and complaints
- Section 3: Program administration; and Section 4: Program design and delivery – these two sections describe the criteria on which the program will be assessed, as well as the minimum standards and submission requirements for each of the criteria
- Section 5: Summary – summarises the application requirements
- Appendix 1: Application Form for Accreditation of Genetic Counselling Programs – must be completed as part of the application
- Appendix 2: Curriculum Content Checklist – must be completed as part of the application

Please also refer to the HGSA Policies:
- HGSA Continuing Professional Development for Genetic Counsellors Policy
- HGSA Practitioner Certification for Genetic Counsellors Policy
- HGSA Competency Standards for Genetic Counsellors Policy
Section 2: Accreditation

Section 2 describes the accreditation process.

Accreditation Status

Programs are required to meet the minimum standards defined in this document for accreditation. These standards should provide guidance for the development of new graduate programs. The extent to which a program complies with these standards determines its accreditation status. There are three accreditation categories.

Full accreditation: is awarded when a genetic counselling program fully meets or exceeds the minimum requirements for the training and education of associate genetic counsellors described in this document. Full accreditation will be awarded for a five-year period.

Provisional accreditation: is awarded when some requirements have not been met but the Program substantially meets the minimum criteria and the Program has provided an acceptable plan and time-frame to meet these criteria.

Not accredited: applies to new courses which have not yet sought HGSA accreditation and to courses which have not substantially met the minimum requirements for provisional accreditation.

The Accreditation Committee must be notified of changes to accredited programs which may affect the Program’s ability to meet accreditation requirements (e.g., resignation of the Program director) no less than three months beforehand or as soon as the Program is aware of the proposed changes. Details of the proposed arrangements should be provided for scrutiny.

Application Process

A Program seeking accreditation must submit evidence that it fulfils the requirements for accreditation.

Notification to the Accreditation Committee

The Program must notify the Accreditation Committee of its intention to apply for accreditation three months prior to the written application to ensure the Accreditation Committee is available to review the submission. The Accreditation Committee will acknowledge receipt of the notification. The three months will begin from the date of the Accreditation Committee’s acknowledgement of intention to apply. The Accreditation Committee will contact the Program to arrange a site visit after receipt of the written application.

Programs will be expected to apply for reaccreditation five years from the date of award of full accreditation. The Program must notify the Accreditation Committee of its intention to apply for reaccreditation three months prior to submitting the written application.

Application fees

An application fee of A$500 must be provided with the written application. A site visit is required and travel and accommodation costs of the site visit must be met by the Program.

Written Application

The Program will submit a written application with all the necessary documentation provided as appendices. The Accreditation Committee anticipates that the submission will to a large extent comprise existing course documentation.
The format of the application can be determined by the Program. At a minimum, the application must:

- include a completed application form (Appendix 1: Application Form for Accreditation of Genetic Counselling Programs) and a receipt for payment of application fee.
- address each of the criteria in numerical order (see Sections 3 and 4), with clear referencing to the appendices; note that the Curriculum Content Checklist (Appendix 2) must be completed
- provide a self-assessment for each criterion, namely ‘met’ or ‘not met’
- where a requirement is not yet met, a plan with a time-frame to address this deficit should be provided
- include any major changes which may affect accreditation that are anticipated or scheduled to occur in the following five-year period.

**Assessment of Application**

**Accreditation Committee**

An Accreditation Committee (the Committee) will be nominated by the BoC to assess applications for accreditation and will be approved by the Executive of the HGSA. The Committee will comprise a minimum of three people and be constituted such that it includes:

- a current Board member
- an FHGSA Certified Genetic Counsellor (FHGSA)
- a member/s with experience in the provision of coursework postgraduate degree programs
- a member/s experienced in the accreditation of genetic counselling programs (where feasible).

Several of these criteria may be met by one member. In addition, the Committee may consult other members of the BoC during the assessment process if there are any issues arising that the Committee considers require additional or specialist expertise.

**Site visit**

After reviewing the written application, two members of the Accreditation Committee will conduct a site visit of the Program. One of the site reviewers will be a current member of the Certification Committee and the site reviewers will be approved by the BoC.

At a minimum, the site visit will include:

- a tour of the facilities
- a meeting with the Program director
- a meeting with faculty of the Program
- a discussion with current students of the Program
- a discussion with past students of the Program (where feasible)
- an audit of student placement and related documentation
- an audit of research dissertations.

The site visit will be an opportunity for the Program to discuss any criteria which have not been met in its self-assessment and the plan submitted to address these criteria (refer to Written Application in the Application Process section above). The Program will be notified in advance of any specific issues arising from the written application that the Committee wishes to discuss at the site visit.

The Program will be responsible for developing the schedule for the site visit in conjunction with the Committee.
Determination of status

The site reviewers will report to the Committee on the site visit. The Committee will prepare a report to the BoC, which will in turn make a recommendation to the HGSA Council. The Program will be notified of its accreditation status within three months of the site visit.

If the Accreditation Committee determines that any criteria are not met, the Program will have the opportunity to submit a plan to address these (if it has not already done so). Provisional accreditation will be awarded on approval of this plan by the Accreditation Committee and confirmation by the HGSA Executive. If the plan is not approved the Program will be designated as “not accredited” by the HGSA.

Appeal Process for Accreditation Decisions

An appeal on an accreditation decision may be made to the HGSA. The appeal will be conducted in accordance with Clause 81 of the HGSA constitution and the pursuant Bylaws, except that the Appellant will be an organisation external to the Society rather than a member of the Society.

In the event that the HGSA advises the applicant to seek a review and/or reconsideration of the original decision (Clause 9 of the Bylaws), the BoC will reconvene the Committee. The Committee will review the application and documentation of the Accreditation Committee’s deliberations. The Committee may consult with others on the BoC as it reviews the decision. The Committee may advise the BoC to either affirm the adverse decision or modify or reverse the adverse decision.

Complaints about Program Compliance

Complaint procedure

Complaints about the quality of a Program accredited by the HGSA may be made to the BoC via the HGSA Secretariat. The BoC will consider and investigate only those complaints containing allegations, which, if substantiated, may indicate noncompliance with accreditation standards.

The Chair and members of the BoC and Accreditation Committee are available to discuss concerns in confidence, but complaints will only be investigated upon receipt of a written, signed complaint. While complaints will be handled with discretion, the BoC cannot guarantee the confidentiality of the complainant. Corroborating material must be made available to the BoC and/or Accreditation Committee upon request.

Investigation procedure

The BoC will determine if a complaint raises issues relating to compliance with accreditation standards. The Program Director of the relevant Program will be informed of the complaint in writing and may be requested by the BoC or Accreditation Committee to answer specific questions or provide documentation. The Accreditation Committee or BoC may instigate an investigation of the Program.

If the BoC determines, on the advice of the Accreditation Committee, that the Program is not compliant with accreditation standards, it may recommend to the HGSA Council that accreditation be revoked or that accreditation status is changed to provisional, with a requirement that the Program demonstrate it fully meets the criteria within a defined time-frame.

The complainant will be informed of the BoC’s decision whether or not to initiate an investigation, but will not be informed of the findings of any investigation. The BoC will correspond with both the complainant and the Program convenor in a timely manner. If accreditation standards are found not to be met, the BoC may seek to recoup from the Program any costs arising from investigation of the complaint.
The BoC and/or Accreditation Committee will not intervene on behalf of an individual complainant regarding decisions of the Program that are unrelated to accreditation standards. This includes decisions on admission and assessment.
**Section 3: Program Administration**

Section 3 describes the minimum requirements of program administration and evidence required to demonstrate these.

**Academic Status**

The Program must reside in a recognised Australian or New Zealand university. The institution must be authorised under applicable law or other acceptable authority to provide a program of graduate education.

The Program must be conducted at the standard of a two-year Master’s by coursework as defined by the relevant Australian\(^1\) and New Zealand\(^2\) bodies.

<table>
<thead>
<tr>
<th>Application requirements</th>
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<tbody>
<tr>
<td>Details of the governance structure: i.e. university, faculty and department within which the Program is conducted.</td>
</tr>
<tr>
<td>Details of institutional accreditation.</td>
</tr>
</tbody>
</table>

**Institution Support**

The university assumes primary responsibility for student admissions, curriculum planning, course content, coordination of classroom teaching and supervised clinical practice, appointment of staff, processing of admissions applications and granting the Master’s degree documenting satisfactory completion of the educational program.

The Accreditation Committee take it as a given that graduate programs will comply with the policies of the university with respect to non-discrimination, access to health care, maintenance of records, privacy and other relevant policies.

It is also assumed that the university has assessed the Program as viable and supports its continuance.

Programs must have adequate administrative support to ensure the effective conduct of the Program and administration and management of student candidature.

It is expected that standard documentation of student candidature and progress by the Program will include the information required for audit during the site visit (see below).

<table>
<thead>
<tr>
<th>Application requirements</th>
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</thead>
<tbody>
<tr>
<td>Letter from the Head of the university department or Faculty Dean demonstrating that the university provides the necessary infrastructure for the Program and supports the Program’s continuance.</td>
</tr>
<tr>
<td>Description of administrative support directly available to the Program for the administration and management of student candidature.</td>
</tr>
</tbody>
</table>

**Faculty and Personnel**

The Program must have adequate leadership and management to support the development of the practice-based competencies as described in the HGSA Competency Standards for Genetic Counsellors Policy.

The faculty of the Program must possess the necessary qualifications to perform the functions identified in

\(^{1}\) Australian Qualifications Framework Council (www.aqf.edu.au)

\(^{2}\) Committee on University Academic Programs (http://www.universitiesnz.ac.nz/)
documented job descriptions and continue to maintain and update their professional, teaching, supervisory and administrative knowledge and skills. There must be sufficient staff to provide students with adequate attention, instruction and supervision to acquire the necessary knowledge and to support the development of the practice-based competencies needed to complete the Program.

There must be a faculty member (termed Director for the purposes of this document) who convenes the Program. The Director is responsible for the genetic counselling program in its entirety. The Director should be a CGCANZ with at least five years of clinical experience as a genetic counsellor. If, after national and/or international recruitment attempts, a Program is unable to recruit a suitable Director who meets these requirements (and the requirements of the affiliated university for Director position), and a candidate with equivalent qualifications and experience is being considered, the Program must write to the Accreditation Committee to determine the suitability of this candidate. In this scenario, the Program must have a CGCANZ with at least five years of experience in clinical practice as Co-Chair of the Curriculum Committee, who works closely with the Director to ensure that curriculum development is in line with clinical competencies as listed in the HGSA Competency Standards for Genetic Counsellors Policy. See Section 4: Curriculum, below, for further information about curriculum development and review.

The Accreditation Committee recommends that the Director be skilled and experienced in professional practice, teaching, and supervision. If teaching experience is limited, the Accreditation Committee suggests professional development in teaching and assessment skills. Research experience is also desirable but research expertise may be contributed by another member of the Program’s faculty.

**Instructional staff:** including sessional lecturers, should be competent teachers who are knowledgeable in the course content for which they are responsible. The expectation of the Accreditation Committee is that instructional staff will include professionals with general counselling skills and experience such as psychologists and social workers, medical geneticists, scientists and other qualified individuals. These instructors should demonstrate ongoing professional development, maintenance of their professional skills and competencies and, where relevant, maintenance of certification or registration.

**Clinical supervisors:** The clinical supervisor is the practitioner within the genetics service or department who has responsibility for a student’s clinical placement, including quality of experience, formal supervision arrangements and performance assessment. Clinical supervisors must be CGCANZ, or equivalent if placement is outside Australasia. GCANZ with at least two years of full-time experience may provide day to day supervision of the student during placement, but the clinical supervisor has overall responsibility for the student and their formal clinical supervision and assessment.

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**Application requirements**

CV, including relevant qualifications, experience and professional development, for the Director.

List of instructional staff with subject(s) taught, role (e.g. subject coordinator, sessional teacher, tutor), qualifications and certification/registration status where relevant.

List of clinical supervisors including qualifications, certification status, job title and workplace (professional development activities for clinical staff may be requested).

**Learning Resources and Opportunities**

The university must provide adequate classrooms, laboratories, clinics and administrative offices for program staff and students. Students must have adequate and readily accessible access to current books, journals, online databases and other reference materials related to curricular and clinical activities.
The program is responsible for arranging, coordinating and allocating clinical placements.

See also Section 4: Clinical Placement Standards, below.

<table>
<thead>
<tr>
<th>Application requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of resources and/or infrastructure for student learning.</td>
</tr>
<tr>
<td>Statement from the Director that they, or a delegated faculty member, arrange, co-ordinate and allocate clinical placements.</td>
</tr>
</tbody>
</table>

Student Selection

Admission of students must be made in accordance with clearly defined and published practices of the institution for Master’s level programs. Any academic standards required for admission must be clearly defined, published and readily available to prospective students. The Accreditation Committee supports diversity in the genetic counselling profession so Programs are encouraged to develop strategies to support applications from underrepresented populations.

In view of the academic requirements and the vocational nature of the training, it is recommended that applicants for recognised programs are graduates with a Bachelor degree, preferably in biological sciences, genetics, nursing, psychology, social sciences or education. In addition, it is preferable that applicants will also have gained substantial experience of working in a caring role through either paid or voluntary work in health, social or educational settings, or through previous professional qualification (e.g. nursing or social work).

<table>
<thead>
<tr>
<th>Application requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copies of the program-specific selection policies and criteria.</td>
</tr>
</tbody>
</table>
Section 4: Program Design and Delivery

Section 4 describes the minimum requirements for the design and delivery of the Program. It is expected that the Program will provide clear documentation for students that describes the following, in one or more forms such as a handbook and individual subject descriptions, as required by the relevant university.

Program Design

For optimal learning, clinical genetic counselling Programs are required to provide training over a minimum of the equivalent of two academic years of full-time study. The program should be provided as Master’s by coursework.

The Program’s overall aims and objectives should be clearly stated, align with the awarding institution’s mission and be consistent with development of competency in the five domains of the genetic counselling Competency Standards defined by the BoC (HGSA Competency Standards for Genetic Counsellors). Program Directors will be notified of any changes to the Competency Standards within six months of changes being made. Programs will be required to comply with the updated Competency Standards at next Accreditation (every five years), or demonstrate a plan to do so by the end of the next calendar year.

Course instruction must follow a plan (Program Design) that documents and assesses appropriate subjects, learning experiences and curriculum sequence to attain the learning outcomes necessary for graduation. The relationship between the learning experiences and curriculum with the five Competency Standards (Competency Standards for Genetic Counsellors Policy) should be clear.

Application requirements

Copy of the Program aims and objectives.

Copy of the Program design, as described above. The number of units or hours for each subject must be included. Where units are given, the university’s guidelines for allocation of units must also be included.

Curriculum

The Program must have a Curriculum Committee which reviews the curriculum regularly, the Chair of which will be the Director of the Program. If the Director is not certified (CGCANZ), the Curriculum Committee must have a CGCANZ with at least five years of experience in clinical practice as Co-Chair. Curriculum development and review should be informed by genetic counselling professionals, the majority of whom are CGCANZ with at least five years of clinical experience, as well as experts in medical genetics, laboratory genetics, and other relevant counselling professions (e.g. social work, psychology). The Accreditation Committee also recommends that professionals with expertise in bioethics and health research be included. Committee members should be in positions that enable them to remain abreast of the latest developments in their field of expertise and education and training of related content and skills relevant to genetic counselling.

A breadth of educational experiences should provide students with the necessary knowledge and skills to accurately and reliably perform the functions of a genetic counsellor. The practice-based competencies (see: Competency Standards for Genetic Counsellors Policy) serve as guidelines for preparing entry-level genetic counsellors. Relevant educational experiences include didactic teaching, role plays, observation, experiential learning (including clinical placements), independent study, and supplementary activities such as case conferences, seminars, grand rounds and journal clubs.

Students must be provided with a clear description of each subject, including content, learning objectives and competencies, requirements, and the criteria for assessment.
The curriculum should cover the following domains:

a. **Principles of Human Genetics**
   1. Mendelian and Non-Mendelian Inheritance
   2. Population and Quantitative Genetics
   3. Basis of Human Variation and Susceptibility
   4. Family History and Pedigree Analysis
   5. Normal Development/Abnormal Development

b. **Applicability of Related Sciences to Medical Genetics**
   1. Cytogenetics
   2. Biochemical Genetics
   3. Molecular Genetics and Genomics
   4. Embryology/Developmental Genetics
   5. Teratology
   6. Neurogenetics
   7. Cancer Genetics
   8. Cardiac Genetics.

c. **Principles and Practice of Clinical/Medical Genetics**
   1. Clinical features and natural history of a broad range of genetic diseases, complex common disorders and syndromes of unknown etiology.
   2. Understanding the diagnostic process, including dysmorphology, syndromology, and physical assessment.
   3. Understanding genetic testing, including cytogenetic, molecular, biochemical, prenatal screening and diagnosis, pre-implantation diagnosis and assisted reproductive testing.
   4. Utilising risk assessment skills.
   5. Use of genetics literature, databases, and computerised tools.

d. **Psychosocial Content**
   1. Theories of Counselling
   2. Interviewing Techniques
   3. Individual Psychosocial Development
   4. Family Dynamics
   5. Dynamics of Grief and Bereavement
   6. Multicultural Sensitivity and Competency
   7. Crisis Intervention
   8. Health behaviour and health promotion.

e. **Social, Ethical, and Legal Issues as they pertain to the delivery of Genetics Services**

f. **Health Care Delivery Systems and Principles of Public Health**
   1. Health and Social Policy
   2. Community, Regional, and National Resources and Support Groups
   3. Financial/Reimbursement Issues
   4. Screening
5. Models of delivery of clinical and laboratory genetic services.

**g. Teaching Skills**

1. Ability to identify and address effectively the genetics educational needs of clients, community and lay groups, students, and health and human service professionals.

**h. Research Methods**

1. Familiarity with clinical research methodologies, research design and both quantitative and qualitative data collection and analysis.

A detailed checklist is provided in Appendix 2: Curriculum Content Checklist.

<table>
<thead>
<tr>
<th>Application requirements</th>
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<tbody>
<tr>
<td>Copy of detailed subject descriptions provided to students for each subject.</td>
</tr>
<tr>
<td>Completed checklist (Appendix 2).</td>
</tr>
<tr>
<td>Details of the policies for curriculum development and review.</td>
</tr>
<tr>
<td>A list of the professionals involved in curriculum development and review.</td>
</tr>
</tbody>
</table>

**Mode of Teaching**

The mode of teaching should be relevant to the content of the subject and consistent with evidence of effective learning (e.g. adult learning theory). In particular, role plays are considered essential for the development of counselling skills and genetic counselling competence and students should be participating in role plays regularly.

Students should be informed of the modes of teaching and learning experiences in each subject.

<table>
<thead>
<tr>
<th>Application requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Copies of documentation describing the modes of teaching and learning experiences for each subject, as provided to students.</td>
</tr>
<tr>
<td>Evidence of role plays in the relevant subjects.</td>
</tr>
</tbody>
</table>

**Research Project**

In addition to research methods training, students should complete a research project consistent with a minor research dissertation. The purpose of the research project is to enhance the student’s understanding of the research process informing genetic counselling practice and to better equip them to contribute to research as a practising genetic counsellor. Graduates of Master’s degree programs with a research dissertation are eligible to apply for PhD programs.

In this context, research is meant broadly and encompasses (but is not limited to) evidence-based education program design, piloting of education programs (including an evaluation component), needs assessment, comprehensive clinical audit and evaluation, and should use appropriate qualitative or quantitative methodologies. The project should be related to an aspect of genetic counselling. As genetic counsellors in Australasia do not usually perform laboratory work, extensive laboratory based-research would not usually be considered appropriate as the sole basis for a project.

The research project should be original – that is, it should not duplicate research previously conducted on the same dataset. While the student may not initiate the project, they should provide intellectual input and
be able to justify the research design, explain the findings and identify study limitations. The project should entail a literature review, formulation of research questions, (usually) data collection, and data analysis and presentation of results. While secondary data analysis may be necessary, the complexity of analysis should reflect the focus on this element of the project.

Programs should ensure adequate supervision from genetic counsellors and/or researchers with a suitable level of expertise in the research methodology. The model of supervision used will depend on the resources of the Program.

**Application Requirements**

- Student handbook for research or equivalent, documenting supervision arrangements, project requirements and assessment criteria.
- List of dissertation titles with abstracts and grades awarded each year since last accreditation.
- Random audit of research dissertations (site visit).

**Clinical Placement Standards**

Clinical training experiences must support the development of the practice-based competencies by coordinating and integrating didactic and experiential learning. Placements should be configured so that students obtain a breadth of experience. The Program should communicate regularly with clinical supervisors to ensure that the program staff, clinical supervisors and students have a clear understanding of the objectives, expectations and assessment measures for clinical placements.

Clinical faculty and staff are responsible for students’ clinical placements, supervision and support during placement, with each student having a clinical supervisor within the hosting service allocated by the Program. The clinical supervisor is responsible for the overall supervision and assessment of the student and ensuring that the clinical experience is sufficient to meet the requirements of the Program. The relationship between the university and genetic service providing the placement and the responsibilities of each party should be clearly documented.

**First year**

In the first year of the program, the student should attend a minimum of 26 days of clinical placement in addition to any genetics clinic observational activities undertaken. These may be in community or health settings that provide students with insight into living with an inherited condition.

**Second year**

Clinical placements in the second year must include a minimum of 48 days in clinical settings where genetics services are provided. Students are encouraged to undertake an additional placement of two to four weeks (10-20 days) duration, where possible, to broaden their clinical exposure.

Clinical placement in the second year must provide students with opportunities to have first-hand experience of genetic counselling of individuals and families affected by a broad range of genetic disorders. Clinical experiences must expose students to the natural history and management of common genetic conditions and to the relevant psychosocial issues, as well as provide opportunities to observe and practise a range of genetic counselling functions consistent with development of the core practice-based competencies.

Students should not have an overwhelming majority of cases in any one practice area. It is the responsibility
of the Director to ensure that a student is exposed to a wide breadth of clinical cases from diverse practice areas.

Students must prepare a logbook of a minimum of 50 cases from those they have participated in. These cases must have been supervised by a CGCANZ and/or clinical geneticist and illustrate a diverse and well-rounded training which will prepare the student to work in a range of settings.

The Accreditation Committee recommends using the logbook templates found in the current HGSA Practitioner Certification Policy for Genetic Counsellors.

To be considered a case, the student must demonstrate participation in at least three of the management and counselling activities listed in Table 1 during the face-to-face session.

**Table 1: Management and counselling activities**

<table>
<thead>
<tr>
<th>Case preparation</th>
<th>Contracting</th>
<th>Eliciting medical history</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pedigree documentation</td>
<td>Risk assessment</td>
<td>Discussion of inheritance &amp; risk counselling</td>
</tr>
<tr>
<td>Discussion of diagnosis and natural history</td>
<td>Discussion of testing options/results</td>
<td>Psychosocial assessment</td>
</tr>
<tr>
<td>Psychosocial support &amp; counselling</td>
<td>Resource identification &amp; referral</td>
<td>Follow up</td>
</tr>
</tbody>
</table>

As genetic counsellors expand beyond the traditional settings, it is beneficial for students to be exposed to additional clinical opportunities. In order to enhance a student’s clinical training, programs are encouraged to augment the core 50 cases with experiences such as telemedicine, genetic counselling in a research context, genetic registries, public health genetics practice and clinical experiences supervised by non-genetic providers (e.g. physicians, nurse practitioners). In these situations, it is important that programs assess and document the credentials and qualifications of those who will be supervising the students, develop clear objectives and outcome measures for student experiences, and monitor the students’ activities during the rotation.

**Application requirements**

Details of placements (community and clinical) provided in first and second year, including the minimum time requirements.

Submission of letters from organisations providing placements in genetics clinics documenting the relationship between the Program and provider, their commitment to provide clinical placements and a list of named clinical supervisors employed by them.

Audit of student documentation (site visit).

**Clinical Practice-related Activities and Professional Development**

In addition to clinical placement, students in the second year must attend a minimum of 12 days equivalent (100 hours) of clinical practice-related activities. Examples of these include journal clubs, reflective tutorials and other clinically focused professional development activities.
Application requirements
List of clinically-related activities available to students.
Audit of student documentation (site visit).

Assessment Standards
Programs must ensure that there are objective measures for assessing students’ progress in didactic courses and clinical experiences and that the methods of measuring progress are consistent with the objectives set.
Measures and their assessment should be consistent with standards expected of Master’s level students.
For assessment of research dissertations, the Accreditation Committee encourages, but does not require, inclusion of an assessor external to the Program or an assessor other than the supervisor(s).
Assessment criteria and standards should be clearly documented and available to students.

Application requirements
Copies of assessment criteria and standards as made available to students.

Program Evaluation
The Program must have systems to measure the effectiveness of the course and curriculum, including student evaluation, and to appropriately incorporate evaluation findings.
All key aspects of the program should be assessed either quantitatively or qualitatively as appropriate for the coursework under assessment. Where the institution participates in Quality of Teaching surveys or equivalent, it is expected that the program will encourage their students to complete these.

Application requirements
Copies of policies and protocols for conducting program evaluation.
Copies of policies and protocols for responding to program evaluation findings.
The results of program evaluation conducted since the program’s inception (including response rate) OR since the program’s last accreditation application, as relevant.
Initiatives undertaken in response to program evaluation results since the program’s inception OR since the program’s last accreditation application, as relevant.
## Section 5: Summary of Course Accreditation Procedures

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Standard</th>
<th>Application Requirements</th>
<th>Format</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program Administration (Section 3)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic Status</td>
<td>Conducted by a recognised university</td>
<td>Details of institutional accreditation</td>
<td>Application form</td>
</tr>
<tr>
<td></td>
<td>Master’s standard program</td>
<td>Details of governance structure: i.e. department, faculty and university</td>
<td></td>
</tr>
<tr>
<td>Institution support</td>
<td>Adequate university infrastructure for candidature administration and management</td>
<td>Letter from the Head of Department or Dean of Faculty demonstrating support for program</td>
<td>Written Application</td>
</tr>
<tr>
<td></td>
<td>Viability of program</td>
<td>Description of administrative support directly available to the program for administration and management of student candidature.</td>
<td></td>
</tr>
<tr>
<td>Faculty and personnel</td>
<td>Program Director/Associate Director</td>
<td>CV(s) including relevant experience and professional development,</td>
<td>Application form</td>
</tr>
<tr>
<td></td>
<td>- Certified Genetic Counsellor (CGCANZ)</td>
<td>Application form</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- 5 years’ clinical experience</td>
<td>Written Application</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Experience in clinical practice, teaching and supervision</td>
<td>Written Application</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Instructional Staff</td>
<td>List of staff with subject(s) taught role (e.g. subject coordinator, sessional teacher, tutor), qualifications and certification/registration status where relevant.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Relevant qualifications</td>
<td>List of clinical supervisors, including qualifications, certification status, job title and workplace.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Relevant knowledge and/or skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Clinical Supervisors</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- CGCANZ</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learning resources &amp;</td>
<td>Adequate Resources</td>
<td>Description of resources and/or infrastructure for student learning</td>
<td>Written Application</td>
</tr>
<tr>
<td>opportunities</td>
<td>- Facilities</td>
<td>Statement from the Director that they, or a delegated faculty member, arrange, coordinate and allocate clinical placements.</td>
<td>Site Visit: tour</td>
</tr>
<tr>
<td></td>
<td>- Clinical Placements</td>
<td></td>
<td>Site Visit: student meeting</td>
</tr>
<tr>
<td></td>
<td>- Information Resources</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Selection</td>
<td>Appropriate policies, criteria and process</td>
<td>Copies of Program-specific selection policies and criteria</td>
<td>Written Application</td>
</tr>
</tbody>
</table>
### Criteria | Standard | Application Requirements | Format |
--- | --- | --- | --- |
**Program Design and Delivery (Section 4)**<br>**Design**<br>● Two years FTE Master’s degree by coursework<br>● Stated aims and objectives consistent with development towards genetic counselling competency<br>● Clear program design<br>**Application Requirements**<br>● Copy of the Program aims and objectives<br>● Copy of the Program design including subject hours or units<br>**Format** | Written application |
**Curriculum**<br>● Curriculum covers the required domains<br>● Clear documentation for students<br>● Multidisciplinary curriculum development and review<br>**Application Requirements**<br>● Subject descriptions<br>● Details of policies for curriculum development and review<br>● List of the professionals involved in curriculum development and review<br>**Format** | Written application |
**Mode of teaching**<br>● Mode of teaching clearly relevant to the subject content and consistent with effective learning.<br>● Use of role plays in relevant subjects<br>**Application Requirements**<br>● Copies of documentation describing the modes of teaching and learning experiences for each subject, as provided to students.<br>● Evidence of role plays in the relevant subjects<br>**Format** | Written application |
**Research project**<br>● Original research relevant to genetic counselling<br>**Application Requirements**<br>● Student handbook documenting project requirements<br>● List of dissertations and abstracts, and grades awarded<br>**Format** | Written application |
**Clinical placements**<br>● Minimum of 26 days of placement in first year<br>● Minimum of 48 days of clinical placement in second year<br>● Student Logbook of 50 diverse cases meeting required standards<br>**Application Requirements**<br>● Details of the clinical placements offered in first and second year<br>● Letters from organisations providing placements in genetic clinics<br>● Audit of student documentation<br>**Format** | Written application |
**Clinical practice-related and professional development**<br>● 100 hours of clinical practice-related activities in addition to clinical placement<br>**Application Requirements**<br>● List of related activities available<br>● Audit of student documentation<br>**Format** | Written application |
**Assessment standards**<br>● Objective measures of assessing student progress<br>● Measures and their assessment consistent with Master’s degree standard<br>**Application Requirements**<br>● Copies of the assessment criteria and standards as made available to students<br>**Format** | Written application |
<table>
<thead>
<tr>
<th>Criteria</th>
<th>Standard</th>
<th>Application Requirements</th>
<th>Format</th>
</tr>
</thead>
</table>
| Program evaluation    | • Robust program evaluation with protocols that support student involvement  
                        | • Mechanisms for appropriate response to program evaluation                 | • Copies of policies and protocols for conducting program evaluation                       | Written Application |
|                       |                                                                          | • Copies of policies and protocols for responding to program evaluation findings     |                  |
|                       |                                                                          | • The results of program evaluation conducted since the program’s inception (including response rate) OR since the program’s last accreditation application, as relevant |                  |
|                       |                                                                          | • Initiatives undertaken in response to program evaluation results since the program’s inception OR since the program’s last accreditation application, as relevant |                  |
# Appendix 1: Application Form for Accreditation of Genetic Counselling Programs

**Program Information**

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of the Program</td>
<td></td>
</tr>
<tr>
<td>Current Board accreditation status</td>
<td></td>
</tr>
<tr>
<td>Date of last accreditation by the Accreditation Committee</td>
<td></td>
</tr>
<tr>
<td>Program address (in full)</td>
<td></td>
</tr>
<tr>
<td>Name of institution granting degree</td>
<td></td>
</tr>
<tr>
<td>Institutional address (if different)</td>
<td></td>
</tr>
<tr>
<td>Institutional faculty (e.g., medicine, public health) with administrative responsibility for the Program</td>
<td></td>
</tr>
<tr>
<td>Dean of faculty</td>
<td></td>
</tr>
<tr>
<td>Institutional department with administrative responsibility for the Program</td>
<td></td>
</tr>
<tr>
<td>Head of department</td>
<td></td>
</tr>
<tr>
<td>Year the first degree was awarded by the Program</td>
<td></td>
</tr>
<tr>
<td>Current title of the degree granted</td>
<td></td>
</tr>
</tbody>
</table>

**Program Director**

<table>
<thead>
<tr>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>Administrative title</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Degrees</td>
<td></td>
</tr>
<tr>
<td>FHGSA (Y/N)</td>
<td></td>
</tr>
<tr>
<td>Years of clinical practice</td>
<td></td>
</tr>
<tr>
<td>Contact details</td>
<td></td>
</tr>
<tr>
<td>Years as Program Director</td>
<td></td>
</tr>
<tr>
<td>Signature</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
</tbody>
</table>
FHGSA Co-Chair of Curriculum Committee (if applicable)

Name
Administrative title
Address

Degrees
Year FHGSA awarded
Years of clinical practice
Contact details

Years as FHGSA Co-Chair of Curriculum Committee

Signature                              Date

---------------------------------------------------------------

Board use only

<table>
<thead>
<tr>
<th>Rec’d</th>
<th>Payment rec’d</th>
<th>Granted</th>
</tr>
</thead>
</table>

Accreditation of Masters of Genetic Counselling Programs
Policy Number 2019GC13
December 2019
### Appendix 2: Curriculum Content Checklist

#### Knowledge Base

In the table below specify the main subjects and supplementary activities in which students receive instruction in the topics listed.

<table>
<thead>
<tr>
<th>Content Areas</th>
<th>Subjects</th>
<th>Suppl. Activities (specify)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mendelian inheritance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-Mendelian inheritance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Population and quantitative genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human variation and disease susceptibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family history and pedigree analysis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Normal development/abnormal development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Human reproduction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prenatal Screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cytogenetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Biochemical genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Molecular genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Embryology/developmental genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immunogenetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teratology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cancer genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiac genetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neurogenetics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical features and natural history of genetic diagnosis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dysmorphology/physical assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prenatal and preimplantation genetic diagnosis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genetic/genomic testing and screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Risk assessment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genetics literature, databases, and computerized tools</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Counselling theory and techniques</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Interviewing techniques

Individual psychosocial development

Family dynamics

Grief and bereavement

Multicultural sensitivity and competency

Crisis intervention

Assessment and referral of psychiatric disturbance

Societal and public policy issues

Ethical and legal issues

Health care delivery systems

Community, regional and national resources

Health service funding models and direct to consumer testing

Principles of public health

Theory of health behaviour and health promotion

Teaching skills

Research methodology

**Professional Skills**

Specify the courses and relevant supplementary activities in which student learn the following competencies.

<table>
<thead>
<tr>
<th>Knowledge and Skills Acquired in:</th>
<th>Courses</th>
<th>Supplementary Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Obtaining:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genetic counselling agenda</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family history and pedigree</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical, pregnancy, and developmental history</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social and psychosocial history</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Assessing and determining:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genetic and teratogenic risks</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genetic testing and screening results</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Evaluate social and psychosocial history</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Explaining and discussing:**

- Genetic, medical, and technical information
- Diagnostic and screening methods and reproductive options
- Identify, synthesize, organize & summarize medical and genetic information
- Research options

**Counselling Practice:**

- Cross-cultural counselling
- Written documentation and oral presentation
- Public and professional education
- Case management
- Assessment of client understanding and ability to adapt session based on new information
- Establishing rapport
- Eliciting individual beliefs and values
- Interviewing skills
- Counselling and psychological support
- Promoting and facilitating client decision-making
- Facilitating adaptive responses and coping
- Functioning as part of a multidisciplinary health care team
- Serving as client advocate

**Identifying, utilising and managing:**

- Resources and services
- Genetics literature and data bases
- Ethical, legal philosophical principles
- Personal limitations
- Professional growth opportunities