

2022 Self-Study

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General Overview and Instructions



Fostering excellence in education for the future of genetic counseling

The Accreditation Council for Genetic Counseling (ACGC) was established in 2012 to serve as the accrediting body for the genetic counseling profession. The ACGC's mission is to provide leadership by establishing Standards for graduate level genetic counseling education in order to protect the interests of students and the public, as well as the integrity of the genetic counseling profession through:

- Evaluating educational programs to ensure compliance with those Standards; and
- Accrediting genetic counseling training programs that meet the Standards established by the ACGC.

Eligibility:

The ACGC accredits qualified, masters-level genetic counseling training programs located within institutions chartered by and physically located within the United States and Canada. Sponsoring institutions must be accredited by, and in good standing with, a recognized regional accrediting agency and must be authorized by that agency to confer upon graduates of the Genetic Counseling program a graduate degree.

The graduate degree-granting institution is the sponsoring institution that applies for accreditation. This institution assumes primary responsibility for the program, although it can partner with other institutions that are responsible for providing one or more core program components.

Application Review Process:

Accreditation of genetic counseling programs is a process initiated by the sponsoring institution. It includes a comprehensive review of the program relative to the Standards. It is the responsibility of the genetic counseling program to demonstrate compliance with the Standards. Accreditation decisions are made based on the ACGC evaluation of information contained in the Accreditation Application, the report of site visit evaluation teams, any additional reports or documents requested by the ACGC, and the program's accreditation history.

System Instructions:

You do not need to complete the application in one sitting. The system will allow you to enter responses, save your current progress and finish the submission later.

Navigating the Survey

- Use the Previous or Next links at the bottom of each section page, the arrows next to the Save button at the top of the page, or the appropriate section links in the right navigation menu.
 - **Do not use the back button in your browser without saving your data first or it will not be saved.**
- To save your work at any point, click the Save button at the top of the page.

Uploading Attachments

- If you want to replace a document that you have already uploaded with the same file name, delete the previously uploaded document first. This will ensure that there are no duplicate files uploaded as part of your application. The system does not automatically exchange documents with the same file name.
 - On the top right navigation, click on the Documents tab.
 - Locate the appropriate file and click on the minus sign icon located to the right of the file name.
- To upload all attachments at once:
 - On the top right navigation, click on the Documents tab.
 - Upload your documents.
- To view or remove the uploaded documents:
 - On the top right navigation, click on the Documents tab.
 - If you exit the survey, the Documents section may be accessed at the top of the navigation menu on the Instrument Summary Response page.

Exporting Your Response

- If you have the application open, click on the Export link in the top right-hand corner of the screen. In the pop-up window, click Export/Print. In the top right-hand corner, click the Export icon to export the application to PDF. If you are on the Instrument Response page, which displays the instrument name and lists the instrument sections, click on the link for any instrument section. You will then see the Export link in the top right-hand corner of the screen.

User Guide & FAQs

We recommend that you check out the User Guide and System FAQs posted [here](#). **We suggest bookmarking this page for future reference.** The User Guide and System FAQs contain helpful hints on how to navigate the system to complete the application.

If you have questions or problems, contact the ACGC office at (703) 506-7667 or info@gceducation.org.

Program Information

Q-1

Primary Contact Information

Q-2

Program Design

Q-3

Program Design

Q-4

Program Abstract

Provide a brief description of your program, including the program mission and goals, a brief history from inception, and notable accomplishments since your last accreditation cycle.

SECTION A: ADMINISTRATION - Sponsorship

A1

Sponsorship

A1.1

Institutional Responsibilities

A1.1.1

The program must reside in a graduate degree-granting institution in the United States or Canada. This institution assumes primary responsibility for the program, although it can partner with other institutions that are responsible for providing one or more core program components. United States institutions must be accredited by a regional accrediting organization recognized by the U.S. Department of Education. Canadian institutions must have the appropriate degree-granting authority provided by the relevant provincial or territorial governments.



ACGC serves to accredit master's level genetic counseling programs that prepare individuals to enter the genetic counseling profession.

Findings

No findings provided

Q-5

Please upload or provide a link to the most recent accreditation decision letter from the accrediting body to the sponsoring institution. If providing an upload the file name should be:

A1.1Accreditation_NAMEofDegreeGrantingInstitution

A1.1.2

The mission, goals, and expected outcomes of the program are aligned with those of the sponsoring institution, reflect professional standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the sponsoring institution and genetic counseling program clearly support the program's mission, goals, and expected outcomes and encourage shared governance, fiscal stability, and ongoing efforts to improve program quality and compliance with ACGC Standards and Policies.



- Complying with all requirements of the regional/state accrediting body or Canadian provincial or territorial governments;
- Hiring and maintaining faculty and staff in sufficient numbers and with the expertise and experience required to fulfill ACGC requirements;

- Supporting program faculty's planning of curriculum design, course selection, and program evaluation;
- Permanently maintaining student transcripts;
- Conferring the credential and/or academic degree that documents satisfactory completion of the educational program;
- Ensuring that all genetic counseling program personnel and student policies are consistent with federal and state, provincial or territorial statutes, rules, and regulations;
- Addressing appropriate security and personal safety measures for genetic counseling;
- Students, staff and faculty in all locations where instruction occurs;
- Identifying and managing conflicts of interest for program faculty and staff, including financial interest or other activities that could impact program integrity or sustainability (e.g., individuals who have roles in more than one program);
- Ensuring the fiscal stability of the program;
- Resolving conflicts between accreditation standards and state or local laws governing the institution or program seeking accreditation.

Findings

No findings provided

Q-6

Please document necessary information regarding the institutional administrative oversight (Dean, chair), and partnering institution(s).

Briefly describe how the sponsoring institution fulfills the requirements delineated in Stds. A1.1.2. (max 750 words)

A1.1.3

Programs must maintain affiliation agreements in accordance with institutional requirements. Affiliation agreements are strongly encouraged when other institutions contribute to the program.

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- a. For permanent and temporary placements that are not part of the sponsoring institution, the program is responsible for obtaining formal affiliation agreements whenever the sponsoring institution requires them.
- b. Affiliation agreements may also be required when outside institutions assist the program in research, instructional content/coursework, laboratory work, or other types of activities.
- c. When formal affiliation agreements are not required, the sponsoring institution should execute a Memorandum of Understanding specifying the agreement for services between the program and the outside institution.
- d. The program is responsible for ensuring that there are adequate personnel to provide supervision/training for students and that personnel acknowledge the agreements (See Standard A2).

Findings

No findings provided

Q-7

Briefly describe how the sponsoring institution fulfills the requirements delineated in Standard A1.1.3.

A1.1.4

Resources are allocated to support continuing professional development of the program leadership, staff and principal faculty, including the development of leadership, clinical, teaching, scholarly, and administrative skills needed to carry out positional responsibilities. Resource support may include:

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- Supporting the program leadership and principal faculty in maintaining their ABGC certification status and providing payment of dues and fees related to certification maintenance;
- Providing funding to attend continuing education conferences and professional meetings;
- Allowing:
 - i. Non-vacation time to attend continuing education conferences and professional meetings;
 - ii. Time for clinical practice and research/scholarly activities;
 - iii. Time to pursue an advanced degree and/or providing tuition remission for an advanced degree;
 - iv. Opportunities for faculty review and promotion.

Findings

No findings provided

Q-8

Indicate which of the following opportunities the program's institution supports:

SECTION A: ADMINISTRATION - Institutional Resources

A1.2

Institutional Resources

A1.2.1

Financial Resources

There must be financial resources to operate the educational program in order to fulfill obligations to matriculating and enrolled students. A program must demonstrate financial stability with a 3-year budget plan and a letter of commitment from the sponsoring institution to cover any budget shortfalls. Please refer to the budget guidance in the self-study application. The budget plan must, at a minimum, include the following components:

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Findings

No findings provided

A1.2.2

Program Income

- a. Tuition recovery;
- b. Departmental funding;
- c. Non-tuition institutional funding;
- d. Grant funding;
- e. Additional sources of income.

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Findings

No findings provided

A1.2.3

In-Kind Contributions

- a. Staff/faculty;
- b. Operational expenses/supplies.

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Findings

No findings provided

A1.2.4

Program Expenses

- a. Salaries;
- b. Accreditation fees;
- c. Stipends/honoraria/training for lecturers, fieldwork supervisors, and research mentors;
- d. Office/administrative supplies/capital equipment;
- e. Student support (stipends/scholarships);
- f. Travel/meetings/CEU programs;
- g. Recruitment/interviews;
- h. Memberships/subscriptions/books; and
- i. Other expenses.

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Findings

No findings provided

Q-9

Fiscal Year

What is your institution's fiscal year cycle (month/day to month/day)?

Time Frame (see definitions below)

Q-10a

Program Income Budget

Complete the program income budget table below. The table below should only include income and expenses that are specific to the operating budget of the program. For example, if the

program director's salary is paid by another source, that expense should not be included in the table, but rather described below in the narrative. Support for the students outside of the program (e.g., scholarships, travel money, etc.) should also be included in the narrative.

Definitions and Instructions

Time Frame/Years in budget table: Year 1 is the fiscal year in which your self-study was conducted. The remaining four years would span the subsequent four fiscal years.

Tuition recovery: the total amount of gross tuition collected by the institution (# students anticipated x resident tuition + # students anticipated x non-resident tuition).

Other program income: this may include departmental, college, or dean funding; grant awards; foundation funds; one-time funding. List each source separately using as many rows as necessary. Do not include in-kind contributions in this section.

Continuing education programs: if your program has a regular source of income due to offering of continuing education (such as an online course for non-degree students), you would include known or estimated income from that program.

In-Kind: In-kind support is any support offered to the program for which the program does not pay. Please see budget justification below for instructions on explaining any in-kind support.

BUDGET YEARS	Year 1 (fiscal year)	Year 2 (fiscal year)	Year 3 (fiscal year)	Year 4 (fiscal year)	Year 5 (fiscal year)
PROGRAM INCOME					
Tuition recovery					
Continuing Education Programs					
Other program income (specify and include extra rows if necessary)					
TOTAL PROGRAM INCOME					

Q-10b

Program Expenses Budget

Complete the program expenses budget table below. The table below should only include income and expenses that are specific to the operating budget of the program. For example, if the program director's salary is paid by another source, that expense should not be included in the table, but rather described below in the narrative. Support for the students outside of the program (e.g., scholarships, travel money, etc.) should also be included in the narrative.

Definitions and Instructions

Time Frame/Years in budget table: Year 1 is the fiscal year in which your self-study was conducted. The remaining four years would span the subsequent four fiscal years.

Program Expenses: This section will tally all expenditures anticipated for the program, including any tuition "taxed" or recovered by the institution.

Personnel: Calculate the total costs of salaries and fringe for program leadership, adjunct faculty, any regular faculty that are not part of the program leadership, and administrative support. These costs should be adjusted based on actual or anticipated FTE for each individual.

Honoraria: Clinical supervisors, guest lecturers, or others who are paid for a specific deliverable and are not included in personnel.

Supplies: office supplies, any equipment less than \$5,000, books, other educational materials, laptops, tablets, subscriptions (Zoom, SurveyMonkey, etc...), and recruitment-related supplies (e.g., brochures, catering)

Equipment: Any items exceeding \$5,000

Fees: ACGC annual fee, candidacy application fee, state license fees if paid by the program

Memberships: Include only memberships that are paid by the program for faculty and staff, such as AGCPD, NSGC, ACMG, etc...

Travel: Include program costs for faculty or student travel to clinic sites, conferences, recruitment events, and other types of travel that would impact budget

BUDGET YEARS	Year 1 (fiscal year)	Year 2 (fiscal year)	Year 3 (fiscal year)	Year 4 (fiscal year)	Year 5 (fiscal year)
PROGRAM EXPENSES					
Personnel					
Honoraria					
Supplies					
Equipment					
Fees					
Memberships					
Travel (faculty and staff)					
Travel (students, if applicable)					

Other (specify and include extra rows if necessary)					
Total Program Expenses					

Student Support Budget

Complete the student support budget table below. The table below should only include income and expenses that are specific to the operating budget of the program. For example, if the program director's salary is paid by another source, that expense should not be included in the table, but rather described below in the narrative. Support for the students outside of the program (e.g., scholarships, travel money, etc.) should also be included in the narrative.

Definitions and Instructions

Time Frame/Years in budget table: Year 1 is the fiscal year in which your self-study was conducted. The remaining four years would span the subsequent four fiscal years.

Student support: This category allows you to indicate the types of support students will receive or be eligible for should they wish to apply. Examples include, but are not limited to: stipends (e.g. travel, offset research costs), Work Study, Graduate Assistantships, Financial Aid, Scholarships, and intradepartmental or intramural grants).

BUDGET YEARS	Year 1 (fiscal year)	Year 2 (fiscal year)	Year 3 (fiscal year)	Year 4 (fiscal year)	Year 5 (fiscal year)
STUDENT SUPPORT					
Stipends					
Work Study					
Graduate Assistantships					
Financial aid					
Scholarships					
Intradepartmental/Intramural grants					
Other (specify and include extra rows if necessary)					
Total Student Support					

Q-11

Budget Narrative

In the space provided, address the following questions.

1. Describe the budgetary process for your program.
2. Tuition: Explain how tuition was calculated. If tuition for the genetic counseling program differs from other graduate degree programs at your institution, please describe. If only a portion of tuition is retained by the program, or if no tuition is retained by the program, please explain.
3. Describe any in-kind support offered by departmental or other institutional faculty, clinical supervisors, or others.
4. Describe any other program income and show calculations for the numbers included in the table above.
5. Provide detail to explain the Program Expenses for each category (e.g., how did you arrive at the numbers shown in the table above?).
6. Student support: Describe the types of student support programs to which your students have access and provide an estimate of financial impact on the program and/or overall cost of attendance for the students.
7. Provide a letter of support from the administration of all institutions that provide financial support for your program (e.g. Dean/Chair). The letter must delineate evidence of financial commitment for the next accreditation cycle (6 years for new programs; 8 years for reaccreditation).

Q-12

No document provided

A1.3

Physical and Learning Resources

The program has physical facilities and learning resources needed to successfully operate the educational program and to fulfill obligations to matriculating and enrolled students.



Findings

No findings provided

A1.3.1

Facilities

Physical facilities relate to office, classroom and/or other educational spaces that are necessary for student learning. This includes space to provide confidential academic advising of students by the program leadership, staff and principal faculty offices, space for program conferences and meetings, physical and/or digital space for secure storage of student files and records, and didactic and fieldwork resources designed in number, size and location to operate the educational program proposed.



Findings

No findings provided

Q-13

A1.3.2

Learning Resources

Academic resources include instructional materials, medical information and current literature, other reference materials related to curricular and patient care activities, computer and audio/visual equipment, and other technological resources.



Findings

No findings provided

Q-14

SECTION A: ADMINISTRATION - Program Personnel and Faculty

A2

Program Personnel and Faculty

The program staff and faculty must possess the educational and experiential qualifications to perform their assigned duties and to facilitate student achievement of the ACGC Practice Based Competencies (PBCs). Current and specific job descriptions for program leadership must be maintained by the program and available to the ACGC upon request. Program leadership is required to have designated time that is free from clinical service, research efforts, and institutional responsibilities to perform their educational and administrative duties directly related to the genetic counseling program. Clinical, research and other non-program administrative FTE cannot be used in the program leadership FTE calculation. Faculty and staff must have access and time to participate in continuing professional education to maintain and update their professional, teaching, supervisory, and administrative knowledge and skills.



Findings

No findings provided

Q-15

Please upload your current and specific job descriptions for program leadership positions.

The filename should be: A2LeaderPositionDescriptions_ShortNAMEofProgram (Note: A description is required for each leadership position you include in your program's structure)

Program Leadership Position Title	Job Description
	No document provided

A2.1

Program Leadership

Individuals in program leadership positions are expected to have academic appointments and privileges comparable to other faculty with similar academic responsibilities in the institution. At minimum, each program must have a program director and one additional program leadership position, which is designated to provide immediate oversight of the program in the event of an unexpected leave of absence of the program director. No one member of the program leadership team should be responsible for all of the program-related activities. Overlap in responsibilities and skills among program leaders is encouraged.



Findings

No findings provided

A2.1.1

Program leadership responsibilities include the following:

- Maintaining program compliance with the standards;
- Developing, reviewing, and revising the program's strategic plan, which may include mission, vision, goals, and/or philosophy;
- Long-term planning to ensure the program's fiscal stability;
- Communicating with the ACGC about significant staffing, administrative, financial, and/or fieldwork training changes;



- Developing, reviewing, and overseeing the program admissions process;
- Developing, implementing, and continuously evaluating the program, including all curricular requirements outlined in Section B;
- Coordinating, monitoring, and evaluating all personnel in activities that directly relate to the program;
- Providing academic advising, as well as monitoring, evaluating, and remediating student performance;
- Maintaining and collaborating with the program advisory board and implementing appropriate recommendations.

Findings

No findings provided

Q-16

In each column below mark the roles/responsibilities of the Program Leadership, including whether the role is primary (P), secondary (S) or not applicable (N/A). Complete the overall % FTE dedicated specifically to program leadership responsibilities (as defined in Std. A2.1) for each individual in the last row. For the FTE % fields, please enter the values without the % sign. The fields are configured with the values automatically displayed as percentages.

Responsibility	Director/Co-Director	Co-Director	Associate Director	Assistant Director	Medical Director	Curriculum	Fieldwork Training	Research	Other
<i>Select the appropriate title from the drop-down for fieldwork training positions</i>									
<i>Replace job titles as appropriate for your program:</i>									
Maintaining program compliance with the Standards									
Developing, reviewing, and revising the program's strategic plan, which may include mission, vision, goals, and/or philosophy									
Long-term planning to ensure the program's fiscal stability									
Communicating with the ACGC about significant staffing, administrative, financial, and/or fieldwork training changes									
Developing, reviewing, and overseeing the program admissions process									
Developing, implementing, and continuously evaluating the program, including all curricular requirements outlined in Section B									
Coordinating, monitoring, and evaluating all personnel in activities that directly relate to the program									
Providing academic advising, as well as monitoring, evaluating, and remediating student performance									
Maintaining and collaborating with the program advisory board and implementing appropriate recommendations									
FTE %									

A2.2

Program Leadership Positions

A2.2.1

Program Director or Co-Directors

- Programs may have no more than two (2) co-directors, and both must meet the qualifications delineated below;
- At least one must have a minimum of 0.5 FTE dedicated time to program administration and leadership; and
- Program directors may not serve as program leadership for another program; program directors may serve as faculty for other programs so long as it does not create a conflict of interest.



Findings

No findings provided

Q-17

No response provided

Q-18

Does your PD serve as program leadership for any other program?

Q-19

Does your PD serve as faculty for any other program?

A2.2.2

Qualifications

Program directors of currently accredited programs, developing programs and programs holding Accredited New Program status must:



- a. Hold a master's degree in the discipline of genetic counseling;
- b. Have current certification in genetic counseling by the ABGC or the American Board of Medical Genetics and Genomics (ABMGG);
- c. Recertify with the ABGC;
- d. Have at least five years of experience as a certified genetic counselor, a minimum of three of which must be in a patient-facing role (clinic or research);
- e. Have been the course instructor/instructor of record for at least six credit hours of post-secondary education;
- f. Be available for program administration year-round;
- g. Complete two hours per year of continuing training/coursework in curriculum design, assessment, evaluation, or educational andragogy;
- h. All individuals becoming a program director for the first time must have completed at least 10 hours of training/coursework in curriculum design, assessment, evaluation, or educational andragogy, within the last 10 years;
- i. All individuals becoming a program director for the first time must have provided fieldwork supervision for at least five genetic counseling graduate students for a minimum of 500 total contact hours in the last 10 years; and
- j. Document training, workshops or other experiences related to:
 - i. Leadership;
 - ii. Professional development;
 - iii. Management;
 - iv. Scholarly activities;
 - v. Mentoring;
 - vi. Academic advising; and
 - vii. Andragogy

Findings

No findings provided

Q-20

Please upload the updated PD/Co-Director biosketch for each director/co-director [using the ACGC biosketch template available here](#). File(s) should be named:

A2.2Biosketch_Director_PersonName_ShortNAMEofProgram (NOTE: include the name of the program director where it says PersonName and your program name).

Name	Position Title	Biosketch
		No document provided

A2.2.3

Responsibilities

At a minimum, the program director/co-director is responsible for the following:



- Maintaining program compliance with the standards;
- Developing, reviewing, and revising the program's strategic plan, which may include mission, vision, goals, and/or philosophy;
- Providing academic advising, as well as monitoring, evaluating, and remediating student performance;
- Long-term planning to ensure the program's fiscal stability;
- Serving as the primary contact for communication with ACGC;
- Communicating with the ACGC about compliance with the standards, such as significant staffing, administrative, financial, and/or fieldwork training changes.

Findings

No findings provided

A2.3

A2.3



Q-21

No response provided

A2.3.1

Qualifications

Individuals fulfilling additional program leadership positions may have a complementary professional background other than genetics. However, this individual must:



- a. Hold a master's degree or beyond;
- b. Have professional board certification in the specific field, if available and applicable;
- c. Have a minimum of three years of experience in the field;
- d. Have knowledge of and experience with the genetic counseling profession and practice;
- e. Have knowledge and experience with the leadership roles assigned.

Findings

No findings provided

A2.3.2

Responsibilities

The other program leadership positions are responsible for working in collaboration with the program director(s) to fulfill the responsibilities outlined in Standard A2.1.1.



A2.4

Program Leadership Policies

A2.4.1

Program Leadership Full-Time Equivalent (FTE) Requirements

- a. There is a required minimum ratio of paid FTE dedicated to program leadership per total student enrollment (full or part time):
 - i. ≤ 10 students: 1.0 FTE
 - ii. 11-15 students: 1.0 -1.25 FTE
 - iii. 16-20 students: 1.25-1.5 FTE
 - iv. 21-25 students: 1.5-1.75 FTE
 - v. ≥ 26 students: 1.75-2.0 FTE
- b. A program director or co-director, specifically, must have at least 0.5 FTE dedicated to academic and administrative responsibilities in support of the program.
- c. ACGC recognizes that program leaders often hold other roles within the institution or spend non-program time in clinical practice, administration, or research, but these roles may not be included in the FTE requirements.
- d. The above ratio requirement for an individual program may be increased if based on the judgment of the ACGC, the above-listed ratios are insufficient to meet the needs of a specific program.



Findings

No findings provided

Q-22

There is a required minimum ratio of paid FTE dedicated to program leadership per total student enrollment (full or part time):

- i. ≤ 10 students: 1.0 FTE
- ii. 11-15 students: 1.0 -1.25 FTE
- iii. 16-20 students: 1.25-1.5 FTE
- iv. 21-25 students: 1.5-1.75 FTE
- v. ≥ 26 students: 1.75-2.0 FTE

Q-23

A program director or co-director, specifically, must have at least 0.5 FTE dedicated to academic and administrative responsibilities in support of the program.

A2.4.2

Program Leadership Personnel Change Policy



The program has a responsibility to promptly communicate to the ACGC all personnel changes involving program leadership positions. Except in cases of an emergency change in personnel, the ACGC must be notified in writing at least 30 days prior to commencement of any program leadership change (additions, departures and leaves of absence). In the case of sudden, unplanned loss of program leadership personnel, the ACGC must be notified in writing within two weeks of the occurrence, and a plan/timeline for replacement must be provided. Written notification to the ACGC must include the following items (Please see form to report program leadership change):

- a. The expected date of the personnel change;
- b. A formal plan and timeline for the change;
- c. The contact information of the new/interim/replacement individual(s) who will be responsible for fulfilling the duties of the position – if more than one, designate primary contact for communications with the ACGC;
- d. The time commitment (FTE) of each new/interim/replacement individual; and (Note: During interim appointments and leaves of absence, the total FTE for the program director position is still expected to account for at least 0.5 FTE, and total program leadership is required to be maintained at minimum requirements for student enrollment.)
- e. The ACGC biosketch form for the new/interim/replacement individual for the ACGC to confirm their qualifications.

Findings

No findings provided

A2.4.3

Interim Program Director or Co-Director



- a. During interim leadership, the program must submit quarterly reports to the ACGC that include the composition of the search committee, job placement postings, number of applicants, progress in recruiting qualified personnel, and changes in the recruitment plan.
- b. An interim program director or co-director who is serving in a temporary capacity may not serve more than six months without prior authorization from the ACGC.

Findings

No findings provided

A2.4.4.

Program Leadership Leave of Absence



- a. A leave of absence is defined as being absent from a program leadership position for 30 or more consecutive days. A leave of absence may be anticipated (e.g., due to parental or family leave) or unanticipated (e.g., due to illness).
- b. In addition to the required notification information listed above, leave of absence notifications must also include:
 - i. The expected length of time the program leadership personnel will be absent;
 - ii. The anticipated date of return.
- c. The program is expected to have a current operational plan in place at all times for sustaining the activities handled by the program leadership personnel during extended absences. This plan must be outlined in every accreditation application.

Findings

No findings provided

Q-24

SECTION A: ADMINISTRATION - Instructional Faculty/Staff

A2.5

Instructional Faculty/Staff

A2.5.1

Qualifications



The individuals on the instructional faculty/staff must be qualified through academic preparation and/or experience to teach assigned subjects, be knowledgeable in course content and the roles and responsibilities of genetic counselors, and be effective in teaching. The instructional faculty/staff may include:

- Genetic counselors;
- Physicians;
- Basic scientists;
- Psychologists;
- Social workers;
- Other qualified individuals with advanced degrees, experience, or previous academic background in a relevant field or discipline.

Findings

No findings provided

Q-25

Please upload the biosketches for primary instructional faculty/staff that have not already been submitted as part of this application. [Please use the ACGC biosketch template for instructional faculty available here.](#)

These files should be named as follows: A.2.5Biosketch_InstructionalFaculty_NamePerson_ShortNAMEofProgram

Name and Degree(s)	Institution/Department	Job Title (e.g. Asst Prof. of Genetics)	Courses Taught (course # and title)	Biosketch
				No document provided

A2.5.2**Requirements**

The program is required to:



- a. Ensure sufficient depth and breadth of instructional staff to provide students with adequate attention, instruction, and supervised practice to acquire the necessary knowledge and to support the development of the PBCs needed to complete the program;
- b. Provide opportunity for the development of teaching skills;
- c. Submit ACGC biosketches of primary instructional faculty/course directors as part of the accreditation application or the self-study or for new instructors at the time of the annual report of current status.

Findings

No findings provided

Q-26

Please explain how your program provides opportunities for the development of teaching skills to your instructional faculty/staff per standard A2.5.2.

A2.5.3**Responsibilities**

The members of the instructional faculty/staff must establish an atmosphere that is conducive to learning. The instructional faculty/staff is responsible for the following items:



- Classroom and fieldwork teaching;
- Assessing and communicating student performance;
- Identifying students who are not achieving defined objectives;
- Providing remedial instruction;
- Supervising student research when appropriate.

Findings

No findings provided

Q-27

Please explain how you assess whether your instructional faculty/staff are establishing an atmosphere conducive to learning in the classroom and fieldwork. Describe how you plan to respond or have responded to problems that arise in this area. Also describe how the faculty and staff assess and communicate performance, identify students not meeting objectives, and provide remedial instruction per standard A2.5.3.

A2.6**Fieldwork Supervisors**

The program must ensure that the students have sufficient access to fieldwork supervision by board-certified genetic counselors who represent a broad range of genetic counseling techniques and styles. Programs must assess and document the credentials and qualifications of those who will be supervising the students' fieldwork experiences. The standards below are specific to those supervisors who are involved in the 50 required participatory fieldwork cases (see Standard B3.1). For cases that are not part of the 50 required participatory fieldwork experiences, the participating faculty and staff may also include medical geneticists, social workers, psychologists, non-genetics physicians, and other health professionals with adequate training, experience, and credentials in their respective fields.

**Findings**

No findings provided

A2.6.1

Qualifications

- a. Current genetic counselor certification by the ABGC, the Canadian Association of Genetic Counsellors (CAGC), or ABMG[G];
- b. At least one year of experience as a clinical genetic counselor;
- c. Documented preparation in fieldwork supervision.



Findings

No findings provided

Q-28

Please explain how your program assesses and documents the credentials and qualifications of fieldwork supervisors as outlined in standard A.2.6.1 (this also supports B4.2.1).

NOTE: Documentation of qualifications and preparation for fieldwork supervision may be requested by site visitors or ACGC Board.

A2.6.2

Responsibilities

The fieldwork supervisors are responsible for student supervision and performance assessment in fieldwork training sites. Fieldwork supervisors work with the program leadership to:



- Establish fieldwork training goals specific to their setting;
- Define how students will be involved, supervised, and evaluated in client care and related activities;
- Observe, monitor, and evaluate student/client encounters;
- Provide environments conducive to student learning;
- Communicate with program leadership when situations of poor student performance arise.

Findings

No findings provided

Q-29

Please describe how your program maintains compliance to standard 2.6.2 with regard to fieldwork training responsibilities of program leaders and supervisors.

A2.7

A2.7



Q-30

Please explain how your program meets standard A2.7 about administrative support staff.

SECTION A: ADMINISTRATION - Operational Policies and Procedures

A3

Operational Policies and Procedures

A3.1

Sponsoring Institution

A3.1.1

The sponsoring institution is required to publish information about the program. All announcements and advertising must accurately reflect the program offered.



Findings

No findings provided

Q-31

Please provide links to where the institution publishes information about the graduate program and explain how the program ensures such information is accurate in compliance with standard A3.1.1.

A3.1.2

Student, faculty, and staff recruitment, faculty and staff employment, and student admission practices must be non-discriminatory with respect to race, ethnicity, creed, gender, sexual preference, age, disabling conditions, and national origin in alignment with the U.S. Americans with Disabilities Act requirements (https://www.ada.gov/2010_regs.htm) or the Canadian Federal Human Rights Act (<https://www.chrc-ccdp.gc.ca/eng/content/humanrights-in-canada>) or any applicable provincial or territorial human rights acts.



Findings

No findings provided

Q-32

Please explain how your program meets standard A3.1.2.

A3.1.3

Students, faculty and staff must be informed about the institution's defined written policies and procedures for processing student and faculty grievances and allegations of harassment.



Findings

No findings provided

Q-33

Please explain the process of how your program informs students, faculty and staff about policies and procedures related to grievances and allegations of harassment. Include links to this information.

A3.1.4

Students must be informed about, and have access to, student health and counseling services.



Findings

No findings provided

Q-34

Describe how students are informed about student health and counseling services and provide links to this information.

A3.1.5

The health, safety, and privacy of clients, students, faculty, and staff associated with the educational activities must be reasonably safeguarded by the institution.



Findings

No findings provided

Q-35

Please explain how the program/institution safeguards the health, safety, and privacy of clients, students, faculty and staff in compliance with standard A3.1.5.

A3.2

Graduate Program

A3.2.1

Program policies apply to all students, principal faculty, staff and program leadership regardless of location, unless otherwise noted by institutional, state, or provincial requirements.



- a. The program must inform students, staff and faculty of program policies and practices.
- b. The program must have written policies that provide for timely access and/or referral of students to appropriate support services.
- c. If the program has additional policies (other than those of the institution's policies or policies) that supersede institutional policies related to grievances and harassment, the program is expected to document these and make them readily available to students, staff and faculty.

Findings

No findings provided

Q-36

A3.2.2

Admissions



- a. Admission of students must be made in accordance with clearly defined and published practices of the institution.
- b. The program must define, publish, and make readily available on the program website the admission practices of the program. At a minimum, programs are required to include the following information on the program's website:
 - i. Accreditation status.
 - ii. Mission and objectives.
 - iii. Admission requirements regarding prior education (including prerequisite courses), work, and volunteer experiences.
 - iv. All required academic standards for enrollment.
 - v. Degree requirements.
 - vi. Estimation of all costs (tuition, fees, etc.) related to the program.
 - vii. Cumulative board examination pass rates (first-time test takers) for the three most recent classes. For new programs, the first time this posting would be expected is within one year of graduating their third class.
 - viii. Attrition rate for the past three years.
 - ix. Job placement rate in a genetic counseling or related position for the past three years.
- c. The ACGC supports increasing diversity in the genetic counseling profession. Programs are expected to develop strategies to promote applications from underrepresented populations and to summarize their efforts and progress in the accreditation application. Examples of possible strategies include the following:
 - The program establishes annual recruitment goals for underrepresented populations;
 - The program identifies new student scholarship opportunities for underrepresented populations;
 - The program documents activities and attendance by underrepresented candidates at local, regional and national outreach events;
 - The program adds one or more individuals to the admissions committee from local community groups serving underrepresented populations.

Findings

No findings provided

Q-37

A3.2.3

Mission Statement and Objectives

A program's mission and objectives must be consistent with both the institution's mission and with the National Society of Genetic Counselors (NSGC) Code of Ethics and/or, where applicable, the Canadian Association of Genetic Counselors (CAGC) Code of Ethics.



Findings

No findings provided

Q-38

Please provide your mission statement and objectives and explain how they meet this standard.

A3.2.4

Student Handbook

The program must provide students with a student handbook or equivalent that contains the following information:



- a. Required academic standards;
- b. Requirements for progression in the program;
- c. Policies and procedures and information pertaining to:
 - i. Remediation;
 - ii. Withdrawal and dismissal from the program;
 - iii. Processing of student grievances;
 - iv. Processing of allegations of harassment;
 - v. Process for informing students about the availability of support services;
 - vi. Student advising/guidance.

Findings

No findings provided

Q-39

Please provide a copy of the student handbook.

A3.2.5

Length of Training

All graduate programs in genetic counseling are required to provide training over a minimum of 21 months or two academic years.



Findings

No findings provided

Q-40

Please list the length of your program in [**months**]

A3.2.6

Student Records

a. Student files kept by the program and/or institution must include documentation showing:

- i. That the student has met the published admissions criteria;
- ii. That the student has met institutional and program health screening and immunization requirements;
- iii. Student performance while enrolled, including all student evaluations;
- iv. Referrals for support or academic services, including follow-up as allowed by the program's institutional regulations and requirements;
- v. Remediation efforts and outcomes;
- vi. Formal academic guidance/advising the student received;
- vii. Primary and summary documents regarding any formal academic and/or behavioral disciplinary action taken against a student by faculty, staff or others;
- viii. That the student has met the requirements for program completion.

b. Students must have access to their own records, but must not have access to the academic records or other confidential information of other students, staff or faculty.

c. Student health records are confidential and must not be accessible to or reviewed by the program or instructional faculty or staff except for immunization and tuberculosis and drug screening results, which may be maintained and released with written permission from the student.

d. All student records, electronic and/or paper, must be stored securely by the program and institution. These records must be made available for review by the ACGC or their representatives upon request.

e. Grades and credits for courses must be available in the form of an official transcript and must be permanently maintained by the sponsoring institution.



Findings

No findings provided

Q-41

Describe how the program maintains appropriate student records related to A3.2.6 a-e.

A3.2.7

Program Leadership Records must be kept by the program and must include:

- a. Current job descriptions that include duties and responsibilities specific to each program leadership position;
- b. Current curriculum vitae updated annually;
- c. Annual employee/faculty/program leadership evaluations.



Findings

No findings provided

Q-42

Describe how the program maintains program leadership records in compliance with Std. A3.2.7.

SECTION B: CURRICULUM AND INSTRUCTION - Instructional Plan

B1

Instructional Plan

B1.1



Instruction must follow a plan that documents and assesses appropriate learning experiences and curriculum sequence to develop the PBCs necessary for graduation. A variety of methods and materials can be used, including online learning and distance education. The curriculum design must reflect a progression that enables students to develop the PBCs necessary for current and evolving genetic counseling practice.

Findings

No findings provided

Q-43

Provide a narrative describing your program's overall curricular design including:

- How didactic coursework, clinical experiences, research requirements, and supplementary activities are coordinated and integrated to support student attainment of the skills described in the four domains of the Practice-Based Competencies: Genetics Expertise and Analysis; Interpersonal, Psychosocial and Counseling Skills; Education; and Professional Development and Practice.
- How the sequence of the curriculum promotes the development of these competencies.
- The various methods and materials employed in providing instruction (e.g., standard courses, online learning, distance education, etc.).
- Collaboration with faculty/staff in designing and implementing courses.
- How the program assesses and documents whether the instructional plan is promoting the development of the practice-based competencies.
- How the program ensures educational adequacy and equivalency of course content and/or clinical experiences when instruction is conducted at geographically separate locations, provided using different pedagogical and instructional methods or techniques for some students, and/or provided outside the home department.

Q-44

B1.1 List of Required Courses

Using the table below, provide information regarding coursework that is required of all students. Use the course numbers to refer to courses. If coursework is offered at more than one institution, list the institution where offered. **Do not list fieldwork rotations on this form.**

Course Number	Course Title	Name of Instructor or Organizer & Institution	Contact Hours Per Week	Number of Weeks

Q-45

Standard B1.1 Supplementary Curricular Activities

Using the table below, provide the following information regarding supplementary activities (such as case laboratory conferences, journal clubs, grand rounds, research seminars, etc.) in which students are required to participate. Do not include supplemental fieldwork experiences in this table.

* **Frequency** (indicate all that apply): A = daily; B = weekly; C = monthly; D = each semester; E = annually; F = other (specify)

** **Students role(s)** (indicate all that apply): A = attendance; B = case presentation; C = journal presentation; D = observation; E = laboratory activities; F = literature review; G = planning and execution; H = other (specify)

*** **Evaluation method(s)** (indicate all that apply): A = written exam; B = practical exam; C = oral exam; D = faculty or supervisor's evaluation of student's participation or performance; E = grade on research paper or thesis; F = other (specify)

Name or Type of Activity	Location or Site Where Activity Occurs	Frequency of Student Participation*	Student's Role in Activity**	Evaluation Method***

Q-46

Standard B1 Sequence of Required Courses, Fieldwork Placements and Supplementary Activities

Upload completed document based on provided template. Please indicate the duration and timing of required courses, fieldwork placements, and supplementary activities by checking the boxes corresponding to the month(s) of training. If fieldwork placements and other activities can occur at various times, give the sequence as it would be for only one typical student.

Include required activities between the first and second academic years.

Template can be found under the "Documents" tab, under the "Shared" link with document name "**Standard B1 Sequence of Required Courses, Fieldwork Placements and Supplementary Activities Template.xlsx**"

No document provided

B1.2

For each curricular component, the program must define and publish instructional objectives that guide student acquisition of required PBCs. Instructional objectives must be stated in measurable terms and allow assessment of student progress in developing the PBCs. Instructional objectives must address learning expectations of students and the level of student performance required for success.



Findings

No findings provided

Q-47

Upload all course syllabi. Please name them as follows: B1.2CourseNumber_AbbreviatedCourseName_ShortNAMEprogram

Course Number	Course Title	Syllabus
		No document provided

Q-48

Practice-Based Competency Mapping Table:

In the table below indicate the *primary* courses (up to 3), fieldwork placements and/or supplementary activities in which students learn, practice, and demonstrate the following Practice-Based Competencies (PBCs). We understand that several of these competencies may be reinforced in additional courses. If you anticipate that all placements will apply to a specific competency, please indicate "all rotations." However, if you identify a competency that can only be demonstrated through a particular placement, please specify. Note: The competencies below are paraphrased from the 2013 ACGC Practice-Based Competencies for Genetic Counselors.

Competencies	Knowledge and Skills Acquired in:		
	Courses	Rotations	Supplementary Activities
Domain I: Genetics Expertise and Analysis			
1. Demonstrate and utilize a depth and breadth of understanding and knowledge of genetics and genomics core concepts and principles			
2. Integrate knowledge of psychosocial aspects of conditions with a genetic component to promote client well-being.			
3. Construct relevant, targeted, and comprehensive personal and family histories and pedigrees.			
4. Identify, assess, order, facilitate, and integrate genetic/genomic testing options in genetic counseling practice (including molecular and non-molecular testing that directly impacts assessment of inherited risk).			
5. Assess individuals' and relatives probability of conditions with a genetic component or carrier status based on pedigree, test results, and other pertinent information.			
6. Demonstrate the skills necessary to successfully manage a case.			
7. Critically assess the genetic/genomic, medical and social science literature and information.			
Domain II. Interpersonal, Psychosocial and Counseling Skills			
8. Establish a mutually agreed upon agenda.			
9. Employ active listening and interviewing skills to identify, assess and empathically respond to stated and emerging concerns.			
10. Use a range of counseling skills and models to facilitate informed decision-making and adaptation to risks/conditions.			
11. Promote client-centered, informed, non-coercive and value-based decision-making.			

12. Understand how to adapt genetic counseling skills for varied service delivery models.			
13. Apply genetic counseling skills in a culturally responsive and respectful manner to all clients.			
Domain III: Education			
14. Effectively educate clients about a wide range of genetics and genomics information based on their needs, their characteristics, and the circumstances of the encounter.			
15. Write concise and understandable clinical and scientific information for audiences of varying educational backgrounds.			
16. Effectively give a presentation on genetics, genomics, and genetic counseling issues.			
Domain IV: Professional Development and Practice			
17. Act in accordance with ethical, legal, and philosophical principles and values of the genetic counseling profession and the policies of one's institution or organization.			
18. Demonstrate understanding of the research process.			
19. Advocate for individuals, families, communities, and the profession.			
20. Demonstrate a self-reflective, evidence-based and current approach to genetic counseling practice.			
21. Understand the methods, roles, and responsibilities of the process of clinical supervision of trainees.			
22. Establish and maintain professional inter-disciplinary relationships in both team and one-on-one settings, and recognize one's role in the larger healthcare system.			

B1.3

The program is expected to work collaboratively with faculty in designing and implementing courses with appropriate learning outcomes and student assessment tools that reflect the learning outcomes expected of students.



Findings

No findings provided

Q-49

Please explain how the program supports faculty development with respect to course design, implementation, and assessment.

B1.4

The program must demonstrate educational adequacy and equivalency of course content and/or fieldwork experiences when instruction is:

- Conducted at geographically separate locations;
- Provided using different andragogical and instructional methods or techniques for some students;
- Provided outside the home department.



Findings

No findings provided

Q-50

Please comment on how your program meets B1.4 and whether some of the elements of that Standard do not apply because they have no courses provided outside their home department for instance.

B1.5

The program is required to review its curriculum annually and subsequently update the corresponding syllabi.

--

Findings

No findings provided

Q-51

No document provided

SECTION B: CURRICULUM AND INSTRUCTION - Instructional Content

B2

Instructional Content

B2.1

Content Areas

General content areas required to support the development of the PBCs in genetic counseling must include, but are not limited to, the following:

--

Findings

No findings provided

B2.1.1

Principles of Human Genetics/Genomics

- a. Mendelian and non-Mendelian inheritance;
- b. Population and quantitative genetics;
- c. Human variation and disease susceptibility;
- d. Family history and pedigree analysis;
- e. Normal/abnormal human development;
- f. Human reproduction;
- g. Personalized genomic medicine;
- h. Cytogenetics;
- i. Biochemical genetics;
- j. Molecular genetics;
- k. Embryology/developmental genetics;
- l. Teratology;
- m. Variant classification and interpretation.

--

Findings

No findings provided

B2.1.2

Principles of Genetic Counseling and Clinical Genetics

- a. Clinical features and natural history of a broad range of genetic diseases, complex common disorders and syndromes of unknown etiology;
- b. The diagnostic process, including dysmorphology, syndromology, physical assessment, and differential diagnoses;
- c. The process for managing a case in the context of different genetic counseling specialties, including but not limited to: preconception, prenatal, pediatrics, general genetics, cancer, cardiology, neurogenetics, genomic medicine, and laboratory genetic counseling;
- d. Modalities, methods, and applications of cytogenetic, molecular, and biochemical tests, including new/emerging technologies;
- e. Incorporation of individual client factors, including medical history, family history, and insurance coverage, to select the most appropriate genetic testing plan;
- f. Responsibilities related to ordering genetic testing, including but not limited to: interpretation of results, awareness of follow-up implied by results, and liability implications of test practices;
- g. Approaches to choosing appropriate clinical and research laboratories and the role of analytic validity, clinical validity, and clinical utility in the evaluation process;

--

- h. The role of genetic counselors and other professionals in laboratory settings (e.g., commercial, academic, research, and/or public health screening laboratories), including their involvement in the performance and interpretation of genetic/genomic tests, test development and implementation, customer liaison and support, and sales and marketing;
- i. Risk assessment;
- j. Use of genetics literature, bioinformatics, and computerized tools.

Findings

No findings provided

B2.1.3

Psychosocial Content

- a. Theories of counseling;
- b. Interviewing techniques;
- c. Promoting informed decision making;
- d. Facilitating adaptation;
- e. Psychosocial development;
- f. Psychosocial assessment;
- g. Family dynamics;
- h. Dynamics of grief and bereavement;
- i. Multicultural sensitivity and competency;
- j. Disability awareness;
- k. Crisis intervention.



Findings

No findings provided

B2.1.4

Social, Ethical, and Legal Issues in Genetics

- a. NSGC/CAGC Code of Ethics;
- b. Patient/subject privacy issues;
- c. Genetic discrimination and related legislation;
- d. Health disparities and other social determinants of health.



Findings

No findings provided

B2.1.5

Health Care Delivery Systems and Principles of Public Health

- a. Health and social policy;
- b. Community, regional, and national resources;
- c. Financial/reimbursement issues;
- d. Population-based screening (e.g., newborn screening and carrier screening);
- e. Genetics/Genomics as a component of public health services.



Findings

No findings provided

B2.1.6

Education

- a. Identification of the genetics educational needs of clients, patients, community and lay groups, students, and health and human services professionals;
- b. Development of educational tools and materials appropriate to a given audience;
- c. Delivery and evaluation of educational tools and materials.



Findings

No findings provided

B2.1.7

Research Methods

- a. Clinical and laboratory research methodologies and protocol development using both quantitative and qualitative methods;
- b. Formulation of research question(s), data collection, and data analysis;
- c. Dissemination of findings (both oral and written);
- d. Recognition of human subjects' protection and Institutional Review Board (IRB) processes.

Findings

No findings provided

B2.1.8**Professional Development**

- a. Certification examination preparation;
- b. Employment preparation;
- c. Transitioning into the workforce;
- d. Credentialing and licensure;
- e. Opportunities for professional growth;
- f. Self-care topics to prepare students for genetic counseling practice.

Findings

No findings provided

Q-52

In the table below indicate the **primary** courses (up to 3), rotations, and supplementary activities in which students **receive instruction** in the topics listed (Std. B2). We understand that several of these content areas may be reinforced in additional courses.

Content Area	Taught in:		
	Courses	Rotations	Supplementary Activities
B2.1.1 Principles of Human Genetics			
Mendelian and non-Mendelian Inheritance			
Population and quantitative genetics			
Human variation and disease susceptibility			
Family history and pedigree analysis			
Normal /abnormal human development			
Human reproduction			
Personalized genomic medicine			
Cytogenetics			
Biochemical Genetics			
Molecular genetics			
Embryology/developmental genetics			
Teratology			
Variant classification and interpretation			
B2.1.2 Principles and Practice of Genetic Counseling and Clinical Genetics			
Clinical features and natural history of broad range of genetic diseases, complex common disorders, & syndromes of unknown etiology			
The diagnostic process including dysmorphology, syndromology, physical assessment, and differential diagnoses			
The process for managing a case in the context of different genetic counseling specialties, including but not limited to: preconception, prenatal, pediatrics,			

general genetics, cancer, cardiology, neurogenetics, genomic medicine, and laboratory genetic counseling			
Modalities, methods, and applications of cytogenetic, molecular and biochemical tests, including new/emerging technologies			
Incorporation of individual client factors, including medical history, family history, and insurance coverage, to select the most appropriate genetic testing plan			
Responsibilities related to ordering genetic testing, including but not limited to: interpretation of results, awareness of follow-up implied by results, and liability implications of test practices			
Approaches to choosing appropriate clinical and research laboratories and the role of analytic validity, clinical validity, and clinical utility in the evaluation process			
The role of genetic counselors and other professionals in laboratory settings (e.g., commercial, academic, research, and/or public health screening laboratories), including their involvement in the performance and interpretation of genetic/genomic tests, test development and implementation, customer liaison and support, and sales and marketing			
Risk assessment			
Use of genetics literature, bioinformatics, and computerized tools			
B.2.1.3 Psychosocial Content			
Theories of counseling			
Interviewing techniques			
Promoting informed decision making			
Facilitating adaptation			
Psychosocial development			
Psychosocial assessment			
Family dynamics			
Dynamics of grief and bereavement			
Multicultural sensitivity and competency			
Disability awareness			
Crisis intervention			
B2.1.4 Social, Ethical and Legal Issues in Genetics			
NSGC/CAGC Code of Ethics			
Patient/subject privacy issues			
Genetic discrimination and related legislation			
Health disparities and other social determinants of health			
B2.1.5 Health Care Delivery Systems and Principles of Public Health			
Health and social policy			
Community, regional, and national resources			
Financial/reimbursement issues			
Population-based screening (e.g. newborn screening and carrier screening)			

Genetics/Genomics as a component of public health services			
B2.1.6 Education			
Identification of the genetics educational needs of clients, patients, community, and lay groups, students, and health and human service professionals			
Development of educational tools and materials appropriate to a given audience			
Delivery and evaluation of educational tools and materials			
B2.1.7 Research Methods			
Clinical and laboratory research methodologies and protocol development using quantitative and qualitative methods			
Formulation of research question(s), data collection, and data analysis			
Dissemination of findings (both oral and written)			
Recognition of human subjects' protection and Institutional Review Board (IRB) processes			
B2.1.8 Professional Development			
Certification examination preparation			
Employment preparation			
Transitioning into the workforce			
Credentialing and licensure			
Opportunities for professional growth			
Self-care topics to prepare students for genetic counseling practice			

SECTION B: CURRICULUM AND INSTRUCTION - Fieldwork Training

B3

Fieldwork Training

Fieldwork experiences must support the development of the PBCs by integrating didactic and experiential training. The program must regularly train, orient, evaluate, and communicate with its supervisors so that program administration, supervisors, and students have a common, clear understanding of the objectives, expectations, and evaluation measures for fieldwork placements.



Findings

No findings provided

B3.1

General Description Fieldwork Training: Participatory Cases

B3.1.1

Refers to participatory encounters (cases) with a client that support the development of the PBCs. "Client" can refer to individuals seen in a clinic setting; as standardized patients; or in certain research participant encounters.



Findings

No findings provided

B3.1.2

Must include a minimum of 50 required participatory cases. At least 40 of the 50 required participatory cases must be with individuals being evaluated for risk of or affected by diverse genetic conditions across the lifespan (i.e., patients; not individuals who are being consented to research; and not standardized patients).



Findings

No findings provided

B3.1.3

The 50 required participatory cases described above must be supervised by an experienced ABGC/ABMGG/CAGC certified genetic counselor.



Findings

No findings provided

B3.1.4

Programs must demonstrate that participatory cases and other field experiences are conducted (1) across multiple specialties, including prenatal, pediatric, cancer, and other adult; (2) in a variety of diverse settings that may include clinical, laboratory, research, industry, and/or other environments; and (3) using more than one service delivery mode, such as telephone, group, in-person, and/or telemedicine.



Findings

No findings provided

B3.1.5

Programs must provide sufficient opportunities such that students are prepared to practice in each of the main specialties and settings. All participatory encounters (not just the minimum 50 required participatory cases) must be distributed across prenatal, pediatric, cancer, and other adult with no one specialty dominating.



Findings

No findings provided

Q-53

Please complete table for participatory case fieldwork placements, supplementary placements and experiences.

Instructions/Definitions:

Setting: clinic, laboratory, industry, simulation lab, research

Delivery mode: in-person, telephone, video conference

Specialty/Experience: cancer, pediatrics, prenatal, advocacy, variant interpretation, utilization management

BC GC Supervisors: Number of board certified genetic counselors who serve as supervisors

Other Supervisors: Number of other supervisors on-site who are not board certified genetic counselors

Fieldwork Placement Name	Setting	Specialty/Experience Type	Patient/client Life Cycle Stage	Service Delivery Mode	# BC GC Supervisors	# Other Supervisors	Participatory Case Acquisition or Supplemental Experiences
<i>Cancer Clinic X</i>	<i>clinic</i>	<i>cancer</i>	<i>Prenatal</i>	<i>in-person</i>	<i>3</i>	<i>0</i>	<i>Participatory</i>
<i>Lab B</i>	<i>lab</i>	<i>variant interpretation</i>	<i>Pediatric</i>	<i>telephone</i>	<i>1</i>	<i>2</i>	<i>Supplemental</i>
<i>Non-profit C</i>	<i>Non-profit</i>	<i>Patient advocacy</i>	<i>Adult</i>	<i>In-person</i>	<i>1</i>	<i>1</i>	<i>Supplemental</i>

B3.2

General Description Fieldwork Training: Fieldwork Supervision

B3.2.1

Programs must use a flexible and graduated supervision plan where the level of supervision is commensurate with each student's documented skills and competencies. A student in the early part of their training must be directly supervised at all times. After the student consistently achieves specific skills, the focus of direct supervision is expected to position the student to develop not-yet achieved or emerging skills. Programs are expected to monitor their supervisory protocols regularly and to protect students from taking on responsibilities they are not yet ready to handle or that are inappropriate for a student. The program is responsible for ensuring clients are not seen independently by a student who has not yet achieved the necessary skills to provide competent genetic counseling. Furthermore, the program must guard against students being used to compensate for inadequate genetic counselor staffing levels at given fieldwork training sites.



Findings

No findings provided

B3.2.2

Programs must ensure that the number of fieldwork supervisors enables equitable and comparable supervision experiences for all enrolled students.



Findings

No findings provided

Q-54

Please upload fieldwork placement grid for 2 full cohorts. This file should be named: B3.2FieldworkPlacements_ShortNAMEprogram

No document provided

B3.3

Programs must ensure that the number and variety of fieldwork opportunities offer all enrolled students equitable and comparable fieldwork training experiences that provide exposure to the full range of practice settings and full range of PBCs.



Findings

No findings provided

B3.4

B3.4



Findings

No findings provided

Q-55

Upload fieldwork placement syllabi, manual, or guide that includes objectives for each fieldwork placement. The file should be named: B3.4FieldworkObjectives_ShortNAMEprogram

No document provided

B3.5

Programs must outline outcome measures for each fieldwork experience, document student progress, and monitor student activities during the placement.



Findings

No findings provided

B3.6

Programs must maintain documentation of all student fieldwork experiences.



Findings

No findings provided

B3.6.1

ACGC expects each program to determine how each student's fieldwork training will be tracked (e.g., a traditional "logbook" format, portfolio format, etc.). This documentation must provide a complete picture of each student's fieldwork training experiences.



Findings

No findings provided

B3.6.2

Documentation of fieldwork training must be maintained within each student's record and include the entirety of the student's fieldwork encounters, without client identifiers. These files must be available for review during site visits as part of the accreditation review process.



Findings

No findings provided

B3.6.3

The collection of documents demonstrating each student's ongoing fieldwork training as defined in B3.1 must include:

- Fieldwork name;
- Term and year of client encounter;



- PBC(s) addressed;
- The type of practice setting (e.g., clinical, laboratory, research, industry, other);
- The type of service delivery model (e.g., in person, telephone, telemedicine, group, other);
- The type of client (e.g., clinic patient, simulated patient, healthcare provider, research participant);
- Stage of lifecycle for the client (e.g., prenatal, pediatric, adult);
- The primary indication/diagnosis;
- The fieldwork supervisor.

Findings

No findings provided

Q-56

No document provided

No document provided

SECTION B: CURRICULUM AND INSTRUCTION - Supplemental Fieldwork Experiences

B4

Supplemental Fieldwork Experiences

B4.1

In order to enhance a student's acquisition of the PBCs, programs must ensure that fieldwork training for students is augmented with supplemental experiences such as, but not limited to:



- Observational experiences;
- Fieldwork experiences with non-genetics providers (physicians, nurse practitioners, etc.);
- Cases seen with genetics professionals who are not certified by ABGC/CAGC or by the ABMGG, Royal College of Physicians and Surgeons of Canada (RCPSC) in Medical Genetics and Genomics, or the Canadian College of Medical Geneticists (CCMG-CCGM) in Clinical (Medical) Genetics; • International fieldwork experiences;
- Public health genetics-related activities and settings;
- Experiences with genetic counselors that do not meet Standard B3.1.3, which may include, but are not limited to, variant interpretation; test development, implementation and performance; utilization management; customer liaison and support; sales and marketing; leadership and management; and case coordination;
- Involvement with support groups and other advocacy organizations.

Findings

No findings provided

B4.2

Documentation

B4.2.1

Programs must document the credentials and qualifications of those who will be supervising the students in supplemental fieldwork experiences.



Findings

No findings provided

B4.2.2

Programs must develop clear objectives and outcome measures for student experiences and monitor student activities during the supplemental fieldwork placements.



Findings

No findings provided

Q-57

No document provided

SECTION B: CURRICULUM AND INSTRUCTION - Additional Requirements

B5

Additional Requirements

B5.1

Student Teaching Experience

B5.1.1

Programs are required to include teaching opportunities for their students. This can be accomplished in a variety of ways, including but not limited to the following:



- Educational presentations to various populations of learners;
- Peer education presentations;
- Formal teaching assistant experience;
- Class exercises or projects to develop patient, professional, or community educational materials;
- Professional genetics presentations such as journal clubs, research seminars, platform or poster presentations.

Findings

No findings provided

Q-58

Please describe how your program provides teaching opportunities for your students.

B5.2

Research and Scholarly Endeavors

Programs must require that students perform research and other scholarly activities.



Programs can utilize a variety of ways to meet this requirement, including a formal thesis, other independent research project, or capstone project. Programs should encourage and facilitate dissemination of their students' research and scholarly endeavors.

Findings

No findings provided

Q-59

Please describe your program's requirement for student research or other scholarly activities and dissemination of results.

SECTION C: EVALUATION - Advisory Board

C1

Advisory Board

C1.1

Programs are required to establish and maintain an Advisory Board that is familiar with the genetic counseling profession, the clients served by genetic counselors, and the requirements for accreditation.



Findings

No findings provided

C1.2

The purpose of the Advisory Board is to provide program leadership with guidance on program development, implementation, and ongoing evaluation. Additionally, the Advisory Board should participate in the program's self-study evaluations and, where appropriate, assist in the development of modification plans regarding areas identified for improvement.



Findings

No findings provided

C1.3

The Advisory Board is required to meet at least once a year to discuss, review, and act upon suggested modifications to the program based on feedback from both internal and external evaluations. Each program will be expected to define the specific expectations, goals, and processes of its Advisory Board.



Findings

No findings provided

Q-60

No document provided

No document provided

C1.4

Advisory Board membership must include program leadership and instructional, research, and/or fieldwork faculty. Advisory Board membership must include a medical geneticist (holding current certification by ABMGG, Royal College of Physicians and Surgeons of Canada (RCPSC) in Medical Genetics and Genomics, or Canadian College of Medical Geneticists (CCMG-CCGM) in Clinical (Medical) Genetics). Additional members may be alumni, consumers, and representatives of community organizations. At least one member of the Advisory Board must be external to the program leadership, faculty, fieldwork supervisors, staff and the sponsoring/partnering institution(s).



Findings

No findings provided

Q-61

Upload the Advisory Board roster with stakeholder roles identified. This file should be named: C1.4AdvisoryBoardRoster_ShortNAMEprogram.

No document provided

SECTION C: EVALUATION - Program Evaluation Outcome Measures

C2

Program Evaluation Outcome Measures

At a minimum, the following outcome measures must be included in the program's ongoing evaluative processes.



Findings

No findings provided

C2.1

Student Performance on the ABGC Certification Examination

Programs must annually document and evaluate the performance of their alumni on the ABGC board certification examination. If consistent deficiencies are identified in specific categories, modifications to the curriculum and/or program design must be made and documented.



- Programs that fall beneath a first-time board pass rate of 80% over a three-year period must submit a plan for remediation at the time of submission of their Report of Current Status or self-study.
- If the program's first-time board pass rate is consistently below the first-time pass rate national average for more than three consecutive years, the program may be put on probation.

Findings

No findings provided

C2.1

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Findings

No findings provided

Q-62

Student Performance on the ABGC Certification Exam

Use the table below to report on the performance of program graduates from the ABGC School Performance Reports for the indicated years.

At the top of the table, enter the number of matriculants for each class year.

Then enter:

- the number of new examinees (N)
- number of new examinees who passed the exam (NP)
- number of repeat examinees (R)
- number of repeat examinees who passed the exam (RP)

Note: For data analysis purposes, please provide the data using the **year of matriculation**.

Number of Matriculants	Students Matriculating in 2014				Students Matriculating in 2015				Students Matriculating in 2016				Students Matriculating in 2017				Students Matriculating in 2018			
	N	NP	R	RP																
Aug 2016																				
Feb 2017																				
Aug 2017																				
Feb 2018																				
Aug 2018																				
Feb 2019																				
Aug 2019																				
Feb 2020																				
Aug 2020																				
Feb 2021																				
TOTAL																				

Percentage Pass Rates

Calculate the percentage of graduates for each year that passed the exam as a new or repeat examinee and the overall pass rate **for each matriculating class**. The percentages for the board passage rates will calculate automatically based upon the values you entered into the above table. In calculating the overall pass rate, please include only the pass rate for graduates that attempted the examination. **Note:** For data analysis purposes, please provide the data using the year of matriculation.

* Percentage Pass Rate includes only the students who attempted the examination

% Pass Rate	Percentage Pass Rates* Students Matriculated in 2014			Percentage Pass Rates* Students Matriculated in 2015			Percentage Pass Rates* Students Matriculated in 2016			Percentage Pass Rates* Students Matriculated in 2017			Percentage Pass Rates* Students Matriculated in 2018			Cumulative Pass Rates 3 Most Recent Classes
	New	Repeat	Overall	First Time												

Q-63

If the board pass rate for first time test takers is below 80% over a three-year period please describe the remediation strategies/plan the Program implemented to address this issue. For those with a pass rate of 80% or above please check NA.

C2.2

Stakeholder Feedback

Programs are required to conduct surveys and/or interviews with their alumni at least once every four years. Data collected through this process must focus on alumni who graduated since the last four-year cycle. Data must include, but not be limited to, the following:

- Employment setting/type of practice;



- Extent to which fieldwork, didactic, and research skills were adequately addressed in the educational program;
- Identified knowledge or skill gaps;
- Major professional achievements;
- Evaluation of program leadership.
- Soliciting formative feedback from additional stakeholders, including alumni, employers, fieldwork supervisors, and research mentors, is encouraged but not required.

Findings

No findings provided

Q-64

No document provided

C2.3

Personnel Evaluations

Programs must define a process for evaluating the performance of key program personnel, including program leadership, staff, and primary instructional faculty/course directors, that provides measurement of delineated job responsibilities. This process may be determined by the program's institutional policies.



Findings

No findings provided

C2.3.1

Program Leadership

- a. Evaluations must include input from multiple stakeholders, such as students, primary faculty, fieldwork supervisors, department chair, and/or fellow program leaders, as appropriate for the roles of each position;
- b. Evaluations must include self-reflection, goal setting, and measurable performance objectives.



Findings

No findings provided

C2.3.2

Primary Instructional Faculty/Course Directors

- a. Program leadership must have a mechanism to review the performance of primary instructional faculty/course directors, including teaching methods and effectiveness, conducted as part of the standard course evaluations;
- b. Where concerns are noted, a meeting with the faculty member that includes plans for modification/improvement should be documented.



Findings

No findings provided

Q-65

No document provided

C2.4

Course Evaluations

C2.4.1

Course evaluations must be completed for each course taught within the genetic counseling program. The evaluations must be reviewed by both the program leadership and the primary instructional faculty/course directors involved. There must be appropriate documentation of assessment and plans for modification/improvement.



Findings

No findings provided

C2.4.2

The program leadership must obtain copies or summaries of evaluations for required courses that students take through other schools or departments. Alternatively, the program may conduct internal assessments of these external courses to ensure they are meeting the expectations of the students and program.



Findings

No findings provided

Q-66

No document provided

C2.5

Evaluation of Fieldwork Experience

The program must define, maintain, and document effective processes for the initial and ongoing evaluation of all fieldwork experiences to ensure that sites and supervisors meet program-defined expectations for learning outcomes and performance evaluation measures.

C2.5.1

Fieldwork sites

- a. The program must document that each fieldwork site provides the student access to physical facilities, client populations, and supervision necessary to fulfill program expectations of the experience.
- b. Program leadership must regularly monitor each fieldwork site to ensure that each student has completed the expected learning outcomes.
- c. Students must be provided the opportunity to evaluate each fieldwork site.



Findings

No findings provided

Q-67

Upload most current affiliation agreements for each fieldwork site. This file should be named C2.5AffiliationAgreements_ShortNAMEprogram.

No document provided

Upload template for student evaluations of the fieldwork placement sites. This file should be named C2.5StudentEvaluations_ShortNAMEprogram.

No document provided

Describe processes for monitoring fieldwork sites during the placement and communication of feedback regarding evaluations to placement sites.

C2.5.2

Fieldwork supervision

- a. Program leadership must document that supervisors are providing appropriate feedback and mentoring throughout the student fieldwork experience.
- b. Students must be provided with the opportunity to anonymously evaluate the primary supervisor(s) for each fieldwork experience. This feedback must only be shared in aggregate, and after a sufficient number of students have contributed, so as to maintain confidentiality.



Findings

No findings provided

Q-68

No document provided

SECTION C: EVALUATION - Student Evaluation

C3

Student Evaluation

The program must define the process by which it will perform regular and ongoing student evaluation and identify areas for growth and remediation. All documentation regarding student performance and evaluation must be maintained in the student's record.



Findings

No findings provided

Q-69

Describe processes for monitoring, evaluating, and remediating students, including any institutional or program policies (provide link or upload relative section). If remediation plans have been developed for any students, please provide example. This may include warning letter, remediation plan, communications with student and/or dean's office, etc.

No document provided

C3.1

Student Notification

Each matriculating student must be provided in writing, at the beginning of his or her training, with the following:

--

Findings

No findings provided

C3.1.1

The criteria for successful completion of the program and for graduation;

--

Findings

No findings provided

C3.1.2

The evaluation methods that will be employed during his or her training;

--

Findings

No findings provided

C3.1.3

The program's remediation policy;

--

Findings

No findings provided

C3.1.4

Policies regarding academic probation or dismissal.

--

Findings

No findings provided

Q-70

Please briefly describe how student notification occurs as outlined in standard C3.1.

If student notification information listed in C3.1 is NOT in the Student Handbook that was uploaded in A3.2, then please provide links to this information. (Otherwise reviewers are referred to the Student Handbook.)

C3.2

Guidelines for Student Evaluation

C3.2.1

The constellation of student evaluations employed must encompass the program's stated objectives.

--

Findings

No findings provided

C3.2.2

The evaluations must include measures for assessing the acquisition of the PBCs. The evaluations must reflect the student's ability to meet defined learning objectives in all components of the program.

--

Findings

No findings provided

Q-71

Please explain how your program assesses acquisition of the PBCs.

C3.2.3

Each student must receive specific and timely feedback at regular intervals on the acquisition of PBCs from supervisors and/or instructors, as well as formal summative evaluations at the end of each program component. For fieldwork training, mid-rotation evaluations are required; for coursework and research, students must be made aware of their progress prior to completion.



Findings

No findings provided

Q-72

Please explain how students are receiving feedback regarding their overall progress in didactic and fieldwork curriculum and how this meets standard C3.2.3.

C3.2.4

Formal evaluations must be (1) documented in writing, with evidence of direct input by the appropriate faculty/supervisor; (2) reviewed by the program leadership; and (3) maintained in the student's record.



Findings

No findings provided

C3.2.5

There must be a formal mechanism by which the program leadership regularly communicates with each student about his/her overall progress, individual educational needs, and goals (minimum of twice per year). This communication must be documented in writing with a general summary of the topics discussed, and a copy must be placed in the student's record.



Findings

No findings provided

Q-73

Please briefly describe the formal mechanism for communicating with students on their progress and the formal evaluation of graduation readiness as outlined in standards C3.2.5 and C3.2.6.

C3.2.6

Program leadership must conduct a formal evaluation of each student's readiness for graduation at least three months prior to program completion. Program leadership is expected to meet with each student to communicate their readiness, discuss potential outstanding issues, and manage timelines for completion. Written documentation of the discussion should be provided to the student and placed within the student's record.



Findings

No findings provided

Q-74

Please upload the templates used for progress communication meetings throughout the program and what is used three months prior to program completion to assess graduation readiness. This file should be named: C3.2TemplateDocumentFormalStudentComm_ShortNAMEprogram

No document provided

C3.2.7

When remediation is necessary, there must be documentation of deficiencies identified, the remediation plan that is agreed upon, and outcome of the remediation.



Findings

No findings provided

Q-75

No document provided

C3.2.8

Documentation must be maintained for all students who withdraw or are dismissed from the program, including reasons, retention efforts, and/or dismissal procedures followed.



Findings

No findings provided

Q-76

Please list any and all students who have withdrawn, been dismissed, or are on leave (if none please write NONE).

Q-77

SUMMARY and Strategic Plan for Self study:

Provide a brief summary of the key changes and challenges experienced by your program since your last accreditation cycle, and how they were addressed. Conclude with a description of the program's strategic plans for the next 5 years.

Additional Documentation

If you believe additional documentation beyond what is requested is necessary, you may upload it here. Add rows as necessary to upload additional documents.

Document Description	Document
	No document provided