Program Leadership Change

Instructions



Fostering excellence in education for the future of genetic counseling

Program Leadership Change

Please complete the following sections of the document as relevant to the proposed leadership change. Be sure to complete all sections that reflect the impact of this leadership change, for example all changes in teaching responsibilities, thesis/research mentoring, and fieldwork supervision to name a few areas.

Program Responsibility and Cover Letter

Section A

Budget

Program Leadership

Program Leadership Roles and Responsibilities

Guidance/Advising

Section B

Syllabi - <u>only for courses changing primary course faculty</u>

 $Instructional\ Content\ (Table\ B.I.A) - \underline{\it only\ if\ change\ affects\ syllabi\ content}$

Clinical Training/Fieldwork Experience – only if change affects training sites

Section C

Advisory Board Composition

Appendices

Program Responsibility and Cover Letter

Program Responsibility

Accredited programs are required to apply for and receive approval of any program leadership change in advance of implementation in order to ensure maintenance of accreditation status. All requests for program leadership changes must be submitted to the ACGC Executive Office via AMS 30 days prior to the commencement of the leadership change. Late fees (\$500) will assessed for programs that do not report within the time guidelines as directed in Standard A2.4.2.

Cover Letter

Programs must upload a cover letter that describes the proposed leadership change, the rationale for change, and the anticipated impact on the program's ability to meet all relevant Standards (suggested limit: 750 words). Please include the following information in your cover letter:

• Name of each individual leaving, joining or replacing

• Dates that the changes will occur

• Total number of students

• Total FTE before and after the change

• A breakdown of FTE for each individual in leadership before and after the change

In addition, programs must complete the applicable self-study sections for the specific proposed change in order to reflect full impact of this change on program functioning.

No document provided

SECTION A: ADMINISTRATION - Budget

1. Budgetary Impacts

Please upload a description of budgetary impacts relating to this Program Leadership Change.

2. Budget Narrative

In the space provided, describe the budgetary process for the program. Include how the program is funded - via tuition, departmental support, endowments, scholarships, and outside funding, etc. Please discuss how the primary teaching faculty is compensated, for example FTE program paid teaching load, in- kind and/or adjunct faculty.

For programs that receive tuition recovery, provide information on overhead rates/tuition recovery and tuition increases over the last five years (as applicable). Discuss significant changes (if any) that have occurred in this process since the last accreditation cycle.

Provide a letter of support from the administration of all institutions that provide financial support for the program (e.g. Dean/Chair). The letter must delineate evidence of financial commitment for the next five years. Include in **Appendix I – Letters of Support**. [Please limit response to 750 words.]

SECTION A: ADMINISTRATION - Program Leadership

A2.1

Program Leadership

Individuals in program leadership positions are expected to have academic appointments and privileges comparable to other faculty with similar academic

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A. Program Leadership

By completing the leadership information below, you are attesting that the named individuals meet the requirements (qualifications and responsibilities) for this role as delineated in Std. A2.1. Biosketches (using the ACGC biosketch template) and job descriptions of all individuals involved in Program Leadership are to be included in **Appendix II – Biosketches & Job Descriptions**.

A2.2.2

Qualifications

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

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1. Program Director

A2.3

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Additional Leadership Positions

At least one other additional program leadership position must be filled to complement the role of the program director, fulfill the program leadership FTE

- 2. Program Co-Director
- 3. Associate/Assistant Director
- 4. Medical Director
- 5. Clinical Practicum/Fieldwork Coordinator or equivalent

SECTION A: ADMINISTRATION - Program Leadership Roles and Responsibilities

A2.1

Program Leadership

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 Standard. 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
Select the appropriate	te title from the dro	p-down for fie	ldwork training	positions					
Replace job titles as appropriate for your program:									
Maintaining program compliance with the Standards									
Developing, reviewing, and revising the program's strategic plan, which may include mission, vision, goals, and/or philosophy									
Developing, reviewing, and revising the program's plan to identify and address diversity, equity, inclusion, and justice for students, faculty, staff, and leadership									
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 guidance to faculty and staff about where to access required continuing education					
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 %					

A2.4.1

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):

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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

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2. FTE Totals

3. Leadership Narrative (if needed)

Please enter a response below. [Please limit the response to 300 words.]

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

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4. Leadership Absence Protocol

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SECTION A: ADMINISTRATION - Guidance/Advising

A3.2.6

Student Records

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

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Guidance/Advising

Describe how the program provides appropriate guidance and advising to the students, including referral to support services and appropriate follow-up. (Standard A3.2.6) [Please limit response to 500 words.]

SECTION B: CURRICULUM AND INSTRUCTION - Syllabi

Syllabi - <u>only for courses changing primary course faculty</u>

Include in **Appendix III - Curriculum** the syllabi for each didactic and clinical course *in the order in which they appear in Table B.l.A.*Syllabi must include at minimum:

- Course description
- Instructional objectives
- Weekly topics/content
- Evaluation methods

SECTION B: CURRICULUM AND INSTRUCTION - Instructional Content

Please complete this section <u>only if the program leadership change affects syllabi content.</u>

В2

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:

- B2.1.1
- B2.1.2
- B2.1.3
- B2.1.4
- B2.1.5
- B2.1.6

A. Table B.I.A

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.

		Taught in:					
Content Areas	Courses	Rotations	Supplementary Activities				
B2.1.1 Diversity, Equity, Inclusion, and Justice							
Awareness and appreciation of multiple forms of identity including, but not limited to: age, race, ethnicity, sex, gender, sexual orientation, socioeconomic status, country of origin, culture, language, religion, spiritual beliefs, legal status, health history, and disability							
Personal identity and implicit bias							
Critical historical events that affect diverse client populations and their interaction with the genetic counseling field, as well as the broader healthcare system							
Systemic health care disparities and social determinants of health							
Addressing and preventing instances of prejudice/discrimination							
	B2.1.2 Principles of Human Gene	etics/Genomics					
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							
	B2.1.3 Principles 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						
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						
	B2.1.4 Psychosocial Co	ontent				
Theories of counseling						
Interviewing techniques						
Promoting informed decision making						
Facilitating adaptation						
Psychosocial development						
Psychosocial assessment						
Family dynamics						
Dynamics of grief and bereavement						
Crisis intervention						
	B2.1.5 Social, Ethical, and Legal I	ssues in Genetics				
NSGC/CAGC Code of Ethics						
Patient/subject privacy issues						
Genetic discrimination and related legislation						
B2.1.6 Health Care Delivery Systems and Principles of Public Health						
Health and social policy						

Community, regional, and national resources							
Financial/reimbursement issues							
Population-based screening (newborn screening, carrier screening)							
Genetics/Genomics as a component of public health services							
	B2.1.7 Education	ı					
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							
	B2.1.8 Research Methods						
Clinical and laboratory research methodologies and protocols 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							
	B2.1.9 Professional Deve	elopment					
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 - Clinical Training/Fieldwork Experience

Complete this section <u>only if the program leadership change affects training sites</u>.

- 1. Include the most recent rotation schedule/matrix (1st and 2nd years) in ${\bf Appendix}\,{\bf IV}$
- 2. Include clinical agreements or MOUs from all clinical sites in **Appendix IV**

Please explain the changes and the plan to overcome any challenges that arise from these changes.

C1

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.

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A. Advisory Board Composition

In the table below, please indicate the current membership of the program Advisory Board. Add as many rows as needed. Identify the external member(s) with an asterisk after his/her name and credential.

Name with Credentials	Job Title	Institutional Affiliation	Area of Expertise Represented on Advisory Board

Appendices

Listing of Required Content

The following appendices and indicated content should be provided using the Roman numeric order and titles given. Each Upload field is limited to one upload per field. If you need to upload multiple, separate files, you may use the Upload field located at the bottom of this page beneath **Appendix IV.**

**Note: When you believe additional documentation beyond what is requested is necessary, please upload in a separate, labeled appendix.

Listing of Required Content

Provide full biosketches (using the ACGC biosketch template) and job descriptions of all individuals involved in Program Leadership, including but not limited to:

- Director/Co-Director
- Assistant/Associate Director
- Clinical Coordinator/ Fieldwork Facilitator
- Medical Director

Appendix	Required Content	Upload
Appendix I – Letters of Support	Provide a letter of support from the administration of all institutions that provide financial support for your program (e.g. Dean/Chair).	No document provided
Appendix II – Biosketches and Job Descriptions	Provide full biosketches (using the ACGC biosketch template) and job descriptions of all individuals involved in Program Leadership, including but not limited to: Director/Co-Director Assistant/Associate Director Clinical Coordinator/ Fieldwork Facilitator Medical Director	No document provided
Appendix III – Curriculum	Table B.1.A List of Required Courses	No document provided
	Table B.1.B List of Supplementary Activities	No document provided

Table B.1.C Sequence of Required Courses, Rotations and Supplementary Activities	No document provided
Provide the syllabus for each didactic and clinical course in the order in which they appear in Table B.1.A.	No document provided
Provide your most recent rotation schedule/matrix for 1st and 2nd year students.	No document provided
Provide clinical agreements or MOUs from all clinical sites.	No document provided

Please upload any additional documentation as a separate, labeled appendix.

No document provided