



## Changes to the Required Criteria for Accreditation of Training Programs in Genetic Counseling

**Board Approved March 24, 2010**

The changes highlighted in yellow below are the changes approved by the Board of Directors at its meeting on March 24, 2010. Please note the effective dates listed for both new programs applying for provisional accreditation and programs currently accredited. A complete and revised version of the Required Criteria is available on the ABGC website.

### **Section II.F.1 – page 9-10**

## **F. Program Evaluation**

### **1. Outcomes Assessment Measures**

The program must have an ongoing system to review the effectiveness of the educational program, especially as measured by student achievement. For programs applying for provisional accreditation, starting April 1, 2010, and programs applying for full accreditation, starting January 1, 2012, the ABGC requires the establishment of an advisory board to review the process and help guide this effort. Advisory Board membership may include instructional, research, and/or clinical faculty, alumni, consumers, and representatives of community organizations. At least one member of the Advisory Board must be external to the program's institution. Programs must routinely secure sufficient qualitative and quantitative information about graduates to demonstrate ongoing evaluation of outcomes consistent with the competencies specified by the educational program and ABGC. The manner in which programs seek to comply with these criteria may vary. The outcome measures should include data on student performance on the ABGC certification examination and may include, but are not limited to, surveys of graduates and employers on such matters as employment settings, type and scope of practice, salary, job satisfaction, education and skills sufficiently and inadequately addressed in the educational program; interviews with program graduates and employers of graduates.;

### **Section III.3.c – page 14**

c. **Evaluation & Documentation:** ABGC will allow each program to determine the best manner to track trainees' clinical training. Programs may elect to continue to use a logbook-like format, or they may choose to use a portfolio. Regardless of the tracking method, documentation of clinical training experiences should be maintained with the students' files and include the entirety of the students' clinical encounters. Files must not include patient identifiers. These files should be available for

review during site visits as part of the accreditation review process. The record should be a collection of documents which demonstrates the trainee's ongoing clinical training. Items to be included are:

- the 50 cases with information documenting the student's active participation (e.g., the management and counseling roles performed), the type of clinical encounter (e.g., prenatal pediatric, adult, etc.), and supervision provided
- documentation of observations in settings that could include:
  - genetics clinics
  - support groups or other community activities
  - conferences
- documentation of clinical interactions with individuals/families affected by a broad range of genetic conditions
- documentation of participation in clinical encounters that are not part of the 50 core cases
- evaluation by a metric that measures and reports how the student is meeting clinical training requirements
- Evaluations related to clinical training.

***Programs undergoing accreditation in 2011 must have this evaluation metric in place prior to the application deadline January 2, 2011.***

For more information regarding the rationale around these decisions, please see ABGC's article in the Summer Issue of *Perspectives*. To download the entire revised document visit the website at [http://www.abgc.net/CMFiles/REQUIRED\\_CRITERIA\\_final\\_Mar\\_24\\_201051NAW-5112010-7109.pdf](http://www.abgc.net/CMFiles/REQUIRED_CRITERIA_final_Mar_24_201051NAW-5112010-7109.pdf)