NSGC REPORT Genetic counselor training programs: capacities and needs Presented by Robin L. Bennett, MS, CGC **Past-President I, NSGC** NSGC—The leading voice, authority and advocate for the genetic counseling profession

SACGHS Request

"Develop a plan for gathering data on what is needed to increase the number, diversity and quality of training of genetic counselors."

June 2003

Methods

Information collected: July -October 2003 Survey/meeting—Association of Genetic **Counseling Program Directors (AGCPD)** Interviews/meeting—American Board of **Genetic Counseling (ABGC)** Consultation: Judith Cooksey, MD, MPH Illinois Center for Health Workforce **Studies**

Methods: NSGC Data Membership: 2100 individuals Expertise/training in genetic counseling North America and abroad ■ ~85% of genetic counselors are members Query: NSGC Industry SIG Review: Professional Status surveys (96-02) **Review:** Executive Office data

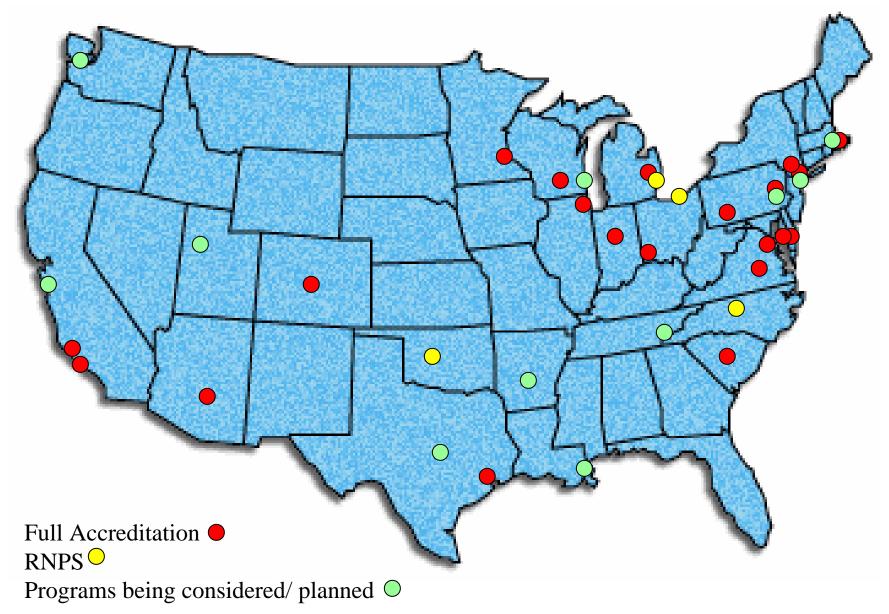
NSGC Report

- Brief review of field of genetic counseling and workforce (focus on U.S.)
- Current status of GC training programs
- Suggestions for expanding existing programs while maintaining high quality
 Suggestions for developing new programs
 Enhancement of diversity of GC profession

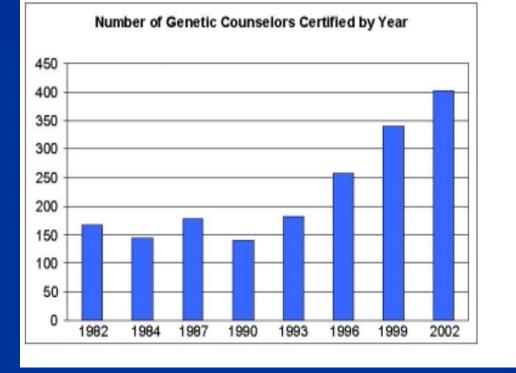
NSGC report does not address

Training and workforce issues of other genetic specialists
Not an independent report
Estimate cost of such a study \$90,000-\$150,000

Geographic Distribution of Genetic Counseling Graduate Programs



ABGC certifies genetic counselors & accredits programs



25 programs in US 3 programs in Canada (also certification by Canadian Association of **Genetic Counselors**) Prior to 1993 responsibility of American Board of **Medical Genetics**

ABGC Accreditation Competency in 27 areas within four critical domains Didactic coursework 800+ hours of comprehensive fieldwork Teaching experience Research experience (most with thesis requirements) Length 18-24 months (NIH-Hopkins-36) mo)

Demand for genetic counseling Difficult to predict behaviors! Increased sophistication of consumers As a profession--GC meet demands ■ Cancer genetics: NSGC 10% 1994 **42% 2002** Increase in overall annual patient load ■~66% increase 2000 to 2002 (345 to 572)

"To whom it may concern: I am responding to your letter refusing genetics consultation on _____ and suggesting that we do pedigrees, etc. on her. You are forgetting who you are writing to. I am a surgeon. Remember, we are not cognitive professionals. I don't know how to do pedigrees. The only people that do pedigrees are genetic counselors and dog breeders. Since she is not a dog, I thought the geneticist would be the best fit, and thus my request."

"Perhaps you will still refuse our small and humble request. Then, in keeping with Frank and Ernest, we will send her to you for genetic counseling."

Frank and Ernest

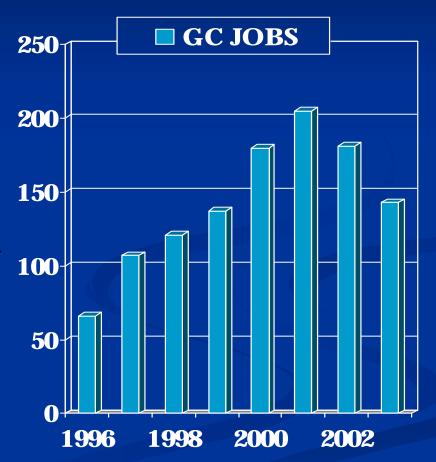


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Job Opportunities

Steady increase in **NSGC Job** postings <75% of GC graduates employed <1 mo. from graduation Myriad Genetics 33 GC (1 in 1996)



Genetic counselors as a community resource

Serve on advisory boards of consumer support groups (71%) Organize conferences and workshops ■37% for health professionals ■14% for consumers

Genetic counselors as teachers

Major teaching role Physician/medical students (77%) ■Other health professionals (34%) Nurses/nursing students (70%) ■Physician assistants (10%) ■Social workers (10%)

Current GC programs Usually housed in academic medical centers Mostly public (6 private schools) **Total enrollment: range from 6-8 to 46** students, average 16 ~550 students applied to US genetic counseling training programs in 2003 **90%** women Qualified applicants – high GPA & GREs

Limits on training programs Quality field placements Loss of a field placement can cause reduction in program's enrollment Enormous volunteer effort clinical supervision (+400 hours per year) teaching Lack of funding for programs & limited scholarship opportunities

Annual costs to train GC student

Average \$30,00
 (Range \$25,000 to \$50,000)

Does not include physical resources or in-kind contributions of many ancillary faculty and clinical supervisors Source: Informal survey of AGCPD

Proposal: Increase Capacity of existing training programs Add additional training sites Student travel and living stipends for out-ofarea clinical rotations (6-9 weeks) ■\$3000 per student per year ■ Supervisor stipend (~100 hours a rotation) **■\$2600** per/student/rotation or ■\$10,400 .20 FTE per student (based on \$25 hour without benefits)

Proposal: Increase capacity of existing training programs Additional faculty Currently limited funding of faculty for clinical and research supervision ■limits number of students can admit Joint appointments, benefit other departments **Faculty FTE genetic counselor:** \$80-100,000 **Faculty FTE Medical Director/geneticist: \$150-**175,000

Enhance existing programs: Training grants for students Make training grants similar to doctoral candidates and many other types of allied health professionals Consider tying program support to limited obligation of practice in an underserved area **Diversity scholarships:** \$50,000 per student **Student stipends:** \$5,000 per student/per year

Increase number of programs

3-4 year start-up funds/require matching funds (?) **Cost estimate: \$533,200 per year --16 students** Genetic counselor program director \$100,000 \$175,000 MD/PhD geneticist \$ 55,000 **Program administrator** Supervisor stipends (x "32") \$ 83,200 \$ 20,000 **Continuing education/resources** \$ 100,000 Diversity scholarships (2 @\$50,000)

Increase access to expert training

Teaching through web casting

- Expert faculty at remote site can lecture to students at single-site or multiple sites
 - Eliminates faculty travel time & expense
- Student communication
 - Journal club, case conferences

Costs: Many medical institutions and universities have access to this equipment, though charges for land lines and tech support

Benefits of targeting funding of genetic counseling training

- Current programs express willingness to expand
 Informal survey-- most existing programs could expand by more than 50%
- At least five programs "waiting" to exist
- Increase diversity of field
- Increase client access and diversity
- Increase access to genetic counselors by other health professionals

Just because genetic testing is more accessible, the genetic counseling issues did not become any simpler

