

INSPECTION OF FACILITIES FOR TRAINING OF INTERN GENETIC COUNSELLORS

EVALUATION REPORT

MEDICAL AND DENTAL PROFESSIONS BOARD:

MEDICAL SCIENCE

This document has to be completed with consideration to the following documents:

- *National Curriculum for Genetic Counsellors (CMS 01 GC),*
- *Guideline on Submission and Assessment of Portfolio: Genetic Counsellors (CMS 02 GC),*
- *Policy regarding the Training of Intern Medical Scientists (CMS A),*
- *Policy regarding the Criteria for the Accreditation of a Training facility for Intern Medical Biological Scientists (CMS B)*
- *A fully completed Self- Evaluation Questionnaire (CMS D2 GC).*

This document comprises two sections, both sections A and B have to be completed by the evaluator.

- Section A should be completed during the actual visit.*
- Section B to be completed before the visit, after careful consideration of the Self-Evaluation Questionnaire and shortcomings have to be identified and listed in detail.*

- c) *During the actual visit the following has to be addressed:*
- *Verify supportive evidence as indicated in the Self-Evaluation Questionnaire.*
 - *Address shortcomings and discussed possible solutions.*

SECTION A

SECTION A SHOULD BE COMPLETED ON THE DAY OF THE VISIT.

1. PARTICULARS OF TRAINING FACILITY

Training Facility	
Head of Training Facility	
Date of inspection	
Discipline	Genetic Counselling
Head of Department	
Report by	
Interview conducted with	

2. GOVERNANCE

- a) Provide an organogram of the management and reporting structures responsible for the overall governance and management of the Training Facility to ensure effective planning, organisation, leadership and control of internship training. Briefly describe membership and main functions of these structures.

- b) Who is responsible to sign off the category-specific exit examination? (It should be Head of the Training Department where intern is based).

- c) Who is responsible for completing the Intern Duty Certificate? (It should be Head of Training Facility).

- d) Who is responsible for compiling and updating of the Intern Medical Scientist HPCSA Annual Report?

3. RESOURCES

a) To what extent does the provision or lack of provision of various clinical settings/facilities influence teaching of interns?

b) To what extent does the staff complement, experience and skill set of staff influence intern training and career progression of interns in future positions?

4. INTERN DEVELOPMENT, SUPPORT AND GUIDANCE

a) Please provide details of the induction / orientation programme for new interns.

b) Describe the management and support of impaired students or students suspected of being impaired (physical/mental).

c) Describe the grievance procedure an intern may follow in case of a dispute.

5. LEARNING RESOURCES

a) Describe how the HPCSA Ethical Guidelines and other relevant ethical documents are implemented to provide for integrated professional integrity and ethical behaviour.

6. FACILITIES/LABORATORIES

a) Describe the nature of the facilities used for training. Is there sufficient clinical exposure to a wide range of diagnoses in the prenatal, paediatric and adult setting?

b) Describe the interaction and exposure to laboratory and other medical health care professionals

c) Describe the entire process surrounding the research component of the training program.

7. INTERN RECRUITMENT

a) How are intern candidates recruited? Are you satisfied with the recruitment and shortlisting process? Provide reasons.

b) Describe the criteria for accepting interns into the training program.

c) Are there interns in the program with entrance level qualification others than *B.Sc.Hons.*? Specify how they were selected?

d) Will the interns be permanently employed at the training facility after successful completion of training and registration?

e) Is there a career progression strategy in place for successful intern candidates? If yes, describe.

8. CURRICULUM

a) Describe the curriculum review and reform processes.

b) How frequently is the curriculum reviewed and how frequently actually reformed?

c) How are changes, advances and innovation in genetic counselling being addressed and implemented in practice in the training program?

d) Are the Portfolio of Evidence of interns appropriately completed and up to date? (Provide evidence)

9. ASSESSMENT OF INTERN PERFORMANCE
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a) Describe how assessments are performed and integrated across the different components and when?

b) Are all the components in the training program being assessed? (Methods and frequency of assessments). In your opinion, is the Guideline on Submission and Assessment of the Portfolio of Evidence fit for purpose?

10. TEACHING STAFF

a) How is staff involved in the internship training program being trained or educated in the principles / components of the program?

b) How are supervisors of interns being identified and assessed?

c) How are trainers involved in the training program trained or educated on the outcomes of the training program?

d) Please complete the following table:

Total of teaching staff				
	Number of Genetic counsellors	Number of Medical Geneticists	Number of other Medical Scientists	Number of other trainers
Department				
Satellite laboratories				
Total				

e) Are the supervisors adequately involved in the training program and the outcomes?

f) Are supervisors involved in assessment and moderation of Portfolio of Evidence? Please give your opinion on supervisor involvement in assessment and moderation?

g) Are supervisors involved in accreditation visits of other training facilities? Please give your opinion on the benefits and / or limitation of involvement.

h) Please complete the following table:

Supervisors and Intern Candidates		
Name of supervisor	Name of Intern candidate	Ratio
1.		
2.		
3.		
4.		
Total:	Total:	Overall ratio:

SECTION B

SECTION B SHOULD BE COMPLETED AFTER CAREFUL CONSIDERATION OF THE SELF-EVALUATION QUESTIONNAIRE, BEFORE THE VISIT AND SHORTCOMINGS HAVE TO BE IDENTIFIED AND LISTED.

PLEASE NOTE NUMBERING IS BASED ON THE SELF-EVALUATION QUESTIONNAIRE

4.2. INTERN TRAINING PROGRAM

Please note that internship training has to be performed in a diagnostic/clinical environment in alignment with the scope of profession for medical biological scientists. ***ENSURE THAT ALL COMPONENTS PRESCRIBED IN THE NATIONAL CURRICULUM GUIDELINES ARE INCLUDED AND CLEARLY DOCUMENTED.***

- 4.2.1 List the different elements of the program and the methods of training instruction (lectures, academic activities, self-study, tutorials, workshops, practical training) and frequency (weekly, monthly, once-off, continuous etc.):

Comments/Shortcomings:

4.2.2. Please provide details of the facilities available for clinical training in terms of the number of patients (average per clinic), patient profile, number and range of clinics.

Comments/Shortcomings:

4.2.3 Please provide details if this training program is linked to a satellite facility. Satellite facilities should have HPCSA accreditation status as intern medical scientist training facilities.

Comments/Shortcomings:

4.2.4 Please provide details on availability of exposure to various clinical settings:

Comments/Shortcomings:

4.2.5 Provide a rotation roster for all elements including rotations through different departments or off-site rotations at other training facilities

Comments/Shortcomings:

4.2.6 Discuss the list of prescribed textbooks or other literature (electronic/hard copies)

Comments/Shortcomings:

4.2.7 List methods of assessment [e.g. case reports/studies, assay competency (practical), assignments (written or oral), tests/exams (written or oral), research report etc.], and frequency of assessment of each component (e.g. weekly, monthly, quarterly, annually, once-off etc.).
Provide evidence.

Comments/Shortcomings:

4.2.8 Please describe relationship and exposure to molecular laboratory facilities and training in variant interpretation and report analysis.

Comments/Shortcomings:

4.2.9 Do interns have access to other resources e.g. computer, email / internet, library access, access to journals, prescribed and other textbooks, clinical databases? Please list.

Comments/Shortcomings:

5. TEACHING STAFF

5.4 Ratio of supervisor(s): trainees:

_____ : _____

Current number of intern posts per discipline (for training institutions reapplying for accreditation):

Recommended number of interns following evaluation:

5.5 Give your opinion concerning key staff (as specified in CMS D1 (5.1))

	Excellent	Good	Acceptable	Poor
				<i>Provide reasons</i>
Academic qualifications				
Teaching experience				
Development opportunities				
Research and publications				
Membership of societies				
Contact/interaction with students				
Morale				
Fostering a professional/academic climate				

Comments:

6. INTERN EXPERIENCE (FOR TRAINING FACILITIES REQUESTING RENEWAL OF ACCREDITATION)

Refer to CMS F: Evaluation of intern experience

a) Number interns currently appointed

b) Summary of problems/criticisms/concerns raised by interns (if any)

c) Summary of compliments (if any)

7. OVERALL COMMENT ON INTERN TRAINING

Please give details where inadequacies were identified

7.1.1 Does the program comply with and contain all elements prescribed in the national curriculum guidelines?

7.1.2 Are training staff adequately qualified? Are supervisors registered in the appropriate/correct discipline? Are there sufficient numbers of supervisors and trainers to facilitate the training for the recommended numbers of interns?

7.1.3 Are facilities and resources adequate to support training activities?

7.1.4 For facilities reapplying for accreditation – are interns satisfied with their training experience?

8. RECOMMENDATIONS

Approved

Approved conditionally

Not approved

8.1 APPROVED - for five (5) years

a) Approved for how many interns (MAXIMUM number):

b) Accreditation time period:

8.2 APPROVED CONDITIONALLY

a) List conditions:

b) Accreditation time period:

8.3. NOT APPROVED

Please refer to the Policy on for the withdrawal of accreditation for an intern medical scientist training program.

a) List reasons:

8.4 RECOMMENDATIONS:

Kindly note that where a department has been granted conditional approval, a period of two (2) months from the date of receiving the report, will apply pending submission of outstanding/additional documents in order for the panel to finalise the accreditation outcome.