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Human Genetics Society of Australasia

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Australasian Society of Genetic Counsellors Position Statement for Genetic Counselling Intake Assistants

Introduction and Background

The role of the genetic counselling intake assistant (hereafter referred to as “intake assistants”) has been introduced in clinical genetic services across Australasia during the past few years. The Australasian Society of Genetic Counsellors (ASGC) believe that genetic counselling intake assistants are an important part of the genetic counselling team and can assist with effective and efficient genetic counselling. The ASGC hold the position that genetic counselling intake assistants must work in clearly defined roles and be appropriately supervised by qualified genetic counsellors. In addition, ASGC recommends that intake assistant positions be considered according to state labour laws regarding remuneration. The purpose of this statement is to provide an overview of the role of genetic counselling intake assistants and the ways in which they can support the work of qualified genetic counsellors.

Similar intake assistant roles exist in the United Kingdom and The United States of America. The National Society of Genetic Counsellors is conducting research into the role of genetic counselling assistants (National Society of Genetic Counselors, 2014.). Position statements are available for similar roles in other allied health professions including; social work (The Australian Association of Social Workers, 2016), physiotherapy (Australian Physiotherapy Association, 2008) and speech therapy (The Speech Pathology Association of Australia, 2014).

The ASGC Code of Ethics (2008) notes that qualified genetic counsellors have a responsibility to “provide mentoring, supervision and education for colleagues, students and other health professionals” (p.3). Where paid intake assistant positions are established in States with Genetic Counselling training programmes the intake assistant role offers an opportunity for genetic counseling students to develop and consolidate genetic counseling skills.

Rationale for introducing genetic counselling intake assistants

The introduction of the genetic counselling intake assistant role has been driven by:

- The need to manage the increasing demand for genetic counseling services
- The need to optimise the effectiveness, capacity and productivity of the genetic counseling workforce

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The Role

The ASGC consider the intake assistant role to be any role where an individual completes intake-related tasks delegated by a qualified genetic counsellor to support the delivery of genetic counselling services. Preferably, individuals performing the intake assistant role have completed some or all of their training in genetic counselling, or have appropriate skills through experience in clinical genetics and/or counselling (i.e. nurse, social worker, etc.). The genetic counsellor delegating the tasks must train and supervise the individual appropriately and while the intake assistant is responsible for the task, the genetic counsellor remains ethically and professionally accountable to the client and in ensuring the intake assistant has the necessary skill level to perform the task. The intake assistant role should not be a replacement for a genetic counsellor.

Other terms for intake assistants may include: intake workers, intake officers

Overview

1. Intake assistants must be supervised by a practicing genetic counsellor

The supervising genetic counsellor must ensure that intake assistants behave in a manner consistent with the HGSA and ASGC Code of Ethics.

All referrals should be triaged by a practicing genetic counsellor (or other relevant genetic health professional) prior to the intake assistant contacting the patient. It is the role of the supervising genetic counsellor to assess the referrals that are suitable for an intake assistant to action and provide an appropriate intake plan. Intake assistants should not be expected to contact individuals with complex psychosocial concerns.

The supervising genetic counsellor is responsible for the duty of care to the clients. They must provide appropriate supervision and accept responsibility for the work of the intake assistant. The genetic service employing the intake assistant must develop clear documentation to guide the practice of the intake assistant. The service must establish the competency of the intake assistant to carry out the delegated tasks, and provide adequate training and supervision.

A supervising genetic counsellor should be available on all of the intake assistant's work days to answer questions and/or debrief. The intake assistant should feel supported to seek the assistance of a genetic counsellor when new information alters the pre-agreed intake plan. As a part of their training, the intake assistant may benefit from observing genetic counselling appointments and tasks to help inform their understanding of the role.

The intake assistant should review all referrals being considered for discharge (including patients who actively decline an appointment) from the genetic service with their supervising genetic counsellor/relevant genetic health professional before the discharge is finalised.

If a recently graduated genetic counsellor is supervising an intake assistant they should receive professional support and supervision from a more senior genetic counsellor or other relevant genetic health professional. The supervision of a recently graduated genetic counsellor should include discussions regarding delegation of tasks and supervision of the intake assistant.

2. Range of suitable tasks for the intake assistant role:

The role of an intake assistant, as defined above, should under no circumstances be considered an appropriate substitute for a practicing genetic counsellor. Tasks that are delegated to an intake assistant should be limited to activities that include collection of appropriate information in preparation for an assessment and/or appointment. Depending on the resources of the service an intake assistant may perform additional tasks subsequent to the appointment. Tasks outside of this scope are inappropriate for an intake assistant. Qualified genetic counsellors undertake training that equips them with the skills necessary to deal with the complexities of individuals, couples and families in the context of genetic assessment, risk calculation and the provision of complex genetic information.

Depending on the intake assistant's level of experience, suitable tasks may include:

- Phoning patients to collect information to assist with the triage of a referral and/or arrange an appointment
- Transfer of referrals to another genetic service
- Gathering pedigree information by phone
- Sending and follow-up of release of information forms for relevant family members
- Identifying and obtaining necessary documentation (including: pathology reports, post-mortem reports, names of attending specialists and records of previous treatment/ diagnosis)
- Provision of general information to clients regarding the process of a genetic assessment appointment
- Maintaining and updating database information relevant to intake
- Intake-related administrative duties

Tasks NOT suitable for intake assistants:

- Undertaking genetic counselling appointments
- Provision of risk assessment/risk management
- Complex cases (including medical and/or psychological complexities)

3. Intake assistant qualifications

Qualifications for the role of intake assistant could include:

- Current Master of Genetic Counselling student
- Students/graduates of relevant professions (e.g. psychology, social work and nursing)



- Specialised administration staff (however some tasks may not be suitable if they have had no psychosocial and/or clinical training)

Glossary:

- Qualified genetic counsellor: A genetic counsellor who has obtained a minimum of board eligibility through the HGSA Board of Censors in Genetic Counselling
- Other genetic health professionals: specialists who work within the relevant service

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References:

- Australasian Society of Genetic Counsellors (ASGC) Code of Ethics, Document Number 2008 GL02, August 2008, Version 1
- Australian Physiotherapy Association. (2008). Position Statement: working with a physiotherapy assistant or other support worker. Australian Physiotherapy Association.
- National Society of Genetic Counselors, (2014). (2014). Awards and Grants. Retrieved July 3, 2016, from <http://nsgc.org/p/cm/ld/fid=286>
- The Australian Association of Social Workers. (2016). Position statement: Social Work Assistants. Australian Association of Social Workers, 1–4.
- The Speech Pathology Association of Australia. (2014). Working with Support Workers (pp. 1–8). Melbourne: The Speech Pathology Association of Australia Limited.