Career Structure for Genetic Counsellors and Support Roles

Association of Genetic Nurses & Counsellors

Last Update: December 2019

1 This is an interim document, with plans for review and update by the AGNC committee.
Contents

Contents...............................................................................................................................................2
Introduction..........................................................................................................................................3
Overview of what Genetic Counsellors do .........................................................................................3
Evolution of genetic counselling..........................................................................................................4
Benchmarking of the profession ...........................................................................................................5
Overview of Genetic Counsellor Positions and Support Roles...........................................................7
Genomic Assistant ..............................................................................................................................8
Genomic Associate ..............................................................................................................................9
Pre-Registration Genetic Counsellor (‘Trainee’)..................................................................................12
Band 6 Pre-Registration Genetic Counsellor Job Plan ......................................................................15
Genetic Counsellor ..............................................................................................................................17
Band 7 Genetic Counsellor Job Plan ..................................................................................................20
Principal Genetic Counsellor ................................................................................................................22
Band 8a Principal Genetic Counsellor Job Plan ..................................................................................25
Consultant Genetic Counsellor ...........................................................................................................27
Consultant Genetic Counsellor (Clinical) ...........................................................................................27
Consultant Genetic Counsellor (Management) ...................................................................................29
Consultant Genetic Counsellor (Research) ..........................................................................................31

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Introduction
This document offers guidance on the job plans for Genetic Counsellors and Support Roles predominantly with the National Health Service in the UK; however, it can also be applied within industry, private clinical practice as well as research, policy and education.²

Overview of what Genetic Counsellors do
Genetic Counsellors are highly skilled healthcare professionals with training and expertise in genomic medicine and counselling skills. Their role is to interpret and explain genomic information to patients and support such patients and their families to make use of this information. Genetic Counsellors order genomic tests, calculate genetic risk, explain inheritance patterns, interpret variants, arrange medical and/or diagnostic testing as well as testing of relatives, predict risks of genetic disease, refer patients for appropriate disease screening and handle all the consequent psychosocial and ethical issues raised for individuals and their families. They can also act as on-call specialists for urgent referrals to the genetics service and triage referrals into the service.

They are the main health professional group who ‘takes care of the family’, identifying relatives who are at risk of disease, facilitating connection and family communication and arranging appropriate disease screening. In addition to this established clinical practice, the Genetic Counsellor role has also evolved into research, policy, education, management and, more recently, mainstream practice.

Classically Genetic Counsellors work in tandem with their Clinical Geneticist and Clinical Laboratory Scientist colleagues as part of a tertiary Clinical Genetics service; and whilst continuation of this model remains vitally important, for some Genetic Counsellors, an uncoupling of these roles has already started.

The delivery of genetic counselling in a clinical setting is underpinned by evidence and genetic counselling theory. A clinical consultation is expected to take, on average, 45 mins (with more complex cases taking 60-90 mins). Within a full day clinic, the number of patients seen will vary depending on the clinic type, patient concerns and complexity of the cases, however, on average, Genetic Counsellors may see up to 10 patients per full day clinic depending on complexity.

² This is an interim document that will be updated in time with more specific details
In order to register as a Genetic Counsellor and also maintain registration, Genetic Counsellors need to have access to ‘counselling supervision’. This is distinct from clinical supervision (where clinical case management is explored) and different from line management. As per the AGNC recommendations on supervision (agnc.org.uk) counselling supervision is a specific, tailor-made meeting with an external psychotherapist to discuss pertinent ethical, emotional and psychological issues raised by a client encounter. Provision of regular, high quality counselling supervision is crucial to safe practice for Genetic Counsellors.

Evolution of genetic counselling
We envisage that as genomic technology is incorporated into mainstream healthcare settings, Genetic Counsellors will increasingly take up roles outside of specialist Genetics Services, either in other non-Genetics specialist areas (e.g. cancer or cardiac services) or more broadly across a Hospital NHS Trust, providing genetics advice, support and education in a range of local clinical settings.

Genetic Counsellors can help non-specialist clinicians to order the most appropriate test for their patient (thus saving the cost of inappropriate test ordering). They also have a role in helping to discharge inappropriate recall of patients from screening programmes, by refining genetic risks and re-targeting screening (for example, for cancer) to those most at risk of developing disease. They can also sit as the genetics expert in multidisciplinary team meetings across hospital settings, offering advice on referral pathways and patient management.

Historically, the Genetic Counsellor’s work was often overseen by a Consultant Clinical Geneticist, to whom they would answer to. Nowadays, it is more usual for a Genetic Counsellor to by line-managed and held accountable to a Consultant Genetic Counsellor, rather than a Consultant Clinical Geneticist. As mainstreaming is embraced, classic models of line-management are evolving, such that whilst a Genetic Counsellor may retain a connection to the Clinical Genetics Service, they may actually be commissioned via other funding routes and work independently of the traditional Clinical Geneticist/Clinical Laboratory Scientist/Genetic Counselling model of service delivery. As a professional body, the AGNC supports the evolution of the genetic counselling role so that independently practicing Genetic Counsellors are accountable for their own practice and to their own professional regulation as opposed to needing to be ‘responsible to’ Clinical Geneticists.

We have not evolved the role of non-clinical Genetic Counsellors (e.g. in research, policy and education) into any profile other than Consultant level. We have also not explored the role of the laboratory Genetic Counsellor. This position will be reviewed by the AGNC Committee on a periodic basis as and when the need arises.
Benchmarking of the profession
When the NHS rationalised all of its role profiles for consistency, i.e. identifying and benchmarking every skill for each professional group from nurses through to physiotherapists, the AGNC created Genetic Counsellor role profiles that benchmarked to the Agenda for Change knowledge and skills framework.

These role profiles were originally published on the Department of Health website on 01/07/2005 and can still be viewed on the NHS Employers website in 2018. These have been agreed by the NHS Staff Council (which includes review by representatives of both NHS trade unions and NHS organisations) and thus cannot be changed without a new review. They dictate, for example, that a Trainee (‘Pre-Registration’) Genetic Counsellor should be paid on a Band 6 (or equivalent) and a Genetic Counsellor should be paid on a Band 7. Details of these role profiles are provided at the end of this document.

Descriptors of what each banding means in terms of role profile, can be found on the NHS Job Evaluation Handbook (published 2018), and thus clearly articulate what is expected, e.g. in terms of communication skills for any health professional working at a ‘level 5’ (which applies to all Genetic Counsellors, bands 6-8):
“Providing and receiving highly complex, highly sensitive or highly contentious information, where developed persuasive, motivational, negotiating, training, empathic or re-assurance skills are required. This may be because agreement or co-operation is required or because there are barriers to understanding, etc....” (p23 NHS Job Evaluation Handbook)

Our use of terminology
In the UK, the Genetic Counselling profession is composed of individuals from varying professional and academic backgrounds, usually employed by the NHS, and sometimes by industry, research institutes, universities and charities. Since the Career Structure was published by the AGNC in 2005 the role of the Genetic Counsellor has evolved considerably and so too have the support roles. In England, the Genomic Medicine Service (GMS) is undergoing significant change, however, the AGNC has membership across all of the UK as well as Republic of Ireland and so our career structure needs to be of relevance for all. We refer to the general descriptor of ‘Genetics Service’ as the place of work for many Genetic Counsellors, rather than labelling this specifically as a GMS or Regional Clinical Genetics Service. We also refer to the generic title of ‘Genetic Counsellor’ as meaning any level of practice (which covers Pre-Registration, Registered, Principal and Consultant).
Throughout this document we refer to the professional title of ‘Genetic Counsellor’. With the new STP training of some Genetic Counsellors the protected title, subject to statutory regulation by the Health Care Professions Council is ‘Clinical Scientist’; and within this, Genetic Counsellors may choose to also use the title ‘Genomic Counsellor’. For all non-STP trained Genetic Counsellors it is usual to use the title ‘Registered Genetic Counsellor’, together with Genetic Counsellor Registration Board (GCRB) registration number. All of these terms (Genetic Counsellor, Genomic Counsellor, Clinical Scientist) have equivalence to the term ‘clinician’ as per the National Genomic Test Directory and thus Genetic Counsellors generically are one of the health professional groups who can order genetic tests.

In future iterations of this document, job titles will be reviewed. At the current time of writing the genetic counselling profession has not moved en-masse yet to full alignment with Healthcare Scientist roles. However, when this happens then the Career Structure will need updating.

Using a specific title, e.g. Consultant Genetic Counsellor, when not based in the NHS or when working outside of traditional Agenda for Change infrastructures, is up to the discretion of individuals and their employers. While individuals in the genetic counselling profession are voluntarily registered with the GCRB there is no legal protections for the use of titles. The AGNC has no choice but to rely on a trust-based system, where genetic counsellors outside of the NHS, sign up to a voluntary GCRB and AGNC code of conduct and choose job titles that do indeed reflect their level of experience and training.

Job plan rationale
For the Job Plans provided in this document, we are basing work on a full time equivalent of 37.5 hours per week with a maximum of 44 weeks of the year working. We support all Genetic Counsellors taking all of their entitled annual leave and do not expect any Genetic Counsellor to work within their annual leave, sick leave, parental leave (including maternity and paternity leave). We also do not expect Genetic Counsellors to have to backfill clinics that they have not undertaken for these reasons.
Overview of Genetic Counsellor Positions and Support Roles

- Genomic Assistant/Associate
- Pre-Registration Genetic Counsellor
- Genetic Counsellor
- Principal Genetic Counsellor
- Consultant Genetic Counsellor (Clinical, Research, Education, Management)
- Head of Service/Manager
Genomic Assistant

The role profile of Genomic Assistant is relevant only to those who are working within clinical services. It could be at band 3 AfC level.

It is envisaged that Genomic Assistants could take up roles in mainstream services as well as posts in Genetics Services.

Previous Training/Qualifications/Experience

The individual will have achieved the following:

Level 2 apprenticeship in Healthcare science (Genomics Assistant) or equivalent

Roles and Responsibilities

This individual will:

- Have responsibility for a range of clinical and administrative tasks, including:
- Taking samples (blood and saliva) for genetic testing
- Transcribing pedigrees onto computer systems
- Facilitating patient access, including establishing if patient wants to be seen, supporting minority populations to access services, supporting patients with disabilities/audio/visual impairment to access services, contacting patients to explain what clinical genetics can offer, arranging interpreters
- Facilitating patient access to leaflets, signposting to existing resources
- Acting as a chaperone in clinic
- Arranging measurements for patients in clinic, e.g. taking patient’s weight and height
- Responsible for specific and appropriate departmental tasks, e.g. clinical ordering.
- Under instructions from higher bands, collect medical records, request/process samples (e.g. tumour blocks), collect lab reports in preparation for clinic
- Releasing records to other departments after checking appropriate permissions are in place to do so
- Monitoring outstanding records/samples/screening and actioning appropriately
- Administrative support to the genetic counsellors
Limits of Role

The individual will not:

- Offer genetic counseling
- Have sole clinical responsibility for any patients
- Make any clinical risk assessments
- Line-manage staff
- Have any budgetary responsibilities
- Be involved in triaging referrals into the Genetics Service
- Be responsible for business planning
- Be responsible for strategic operations
- Conduct independent complaint investigations or fitness to practice procedures

Genomic Associate

The role profile of Genomic Associate is relevant only to those who are working within clinical services. It could be at band 4/5 AfC level (details to be fine-tuned in time).

It is envisaged that Genomic Associates could take up roles in mainstream services as well as posts in Genetics Services.

Previous Training/Qualifications/Experience

The individual will have achieved the following:

Level 4 apprenticeship in Healthcare science (Genomics Associate) or equivalent

Roles and Responsibilities

This individual will:

Have responsibility for a range of clinical tasks as outlined in the ‘Roles and Responsibilities’ of the Genomics Assistant. In addition, this individual’s work should involve:

- Taking family history
• Making decisions about obtaining appropriate medical and genetic records, results and investigations, cancer confirmations (and delegating the collection of these to Genomic Assistant)
• Obtaining paediatric development information using a proforma
• Facilitating safeguarding (e.g. to confirm parental responsibility for a looked-after child)
• Responsibility for responding to referrals that do not require clinical contact e.g. those that do not meet referral criteria
• Organising and obtaining familial blood or saliva samples to help confirm diagnosis in proband
• Facilitating patient access in more complex scenarios and auditing/improving systems to improve patient access
• Obtaining and/or checking appropriate permission/consent have been given as required for clinic
• Obtaining record of patient choice/consent (not having the full consent conversation, but recording that it has been taken)
• Participation in clinical audit and in some circumstances initiate relevant audit
• Responsible for appropriate and specific departmental tasks e.g. fire warden, health and safety, first aider
• Possibility of working in mainstreaming or in clinical department
• May involve additional responsibilities dependent on speciality, e.g. taking blood pressure, ECGs, ophthalmology, screening
• Working under supervision of clinical team
• May involved line managing band 3 genomic assistant(s) or, at band 5, band 4 associates
• Support triaging done by senior colleagues
• Recognising limits of role and escalating queries appropriately
• Facilitating family communication within limits of taking a family tree
• Monitoring outstanding records/samples/screening and actioning appropriately (and delegating administration to band 3)
• Administrative support to the genetic counsellors
• Facilitating patient support events
• MDT coordination, collating agenda items, taking meeting minutes
• Organising patient days, educational events for Genetic Counsellors
• Education coordination (admin-wise)
• Writing/supporting the creation of patient leaflets, signposting to existing resources
Limits of Role

The individual will not:

- Offer genetic counseling
- Order any level of genetic testing themselves (nor consent for this)
- Have sole clinical responsibility
- Make any clinical risk assessments
- Have any budgetary responsibilities
- Make autonomous decisions about triaging referrals into the Genetics Service
- Be responsible for business planning
- Be responsible for strategic operations
- Conduct independent complaint investigations or fitness to practice procedures
Pre-Registration Genetic Counsellor (‘Trainee’)

The role profile of a Pre-Registration Genetic Counsellor is relevant only to those who are working within clinical services (i.e. there is no equivalent ‘trainee research Genetic Counsellor’ for example, such a post might be labelled a ‘research assistant’). After completing the Set A or Set B criteria to train as a Genetic Counsellor7 it is anticipated that an individual will work in a band 6 Pre-Registration Genetic Counsellor post in a Genetics Service for 2 years and will then be eligible to submit an intention to apply to register as a Genetic Counsellor with the Genetic Counsellor Registration Board.

Alternatively, if a band 6 Pre-Registration Genetic Counsellor is participating in the STP Clinical Scientist (Genomic Counsellor) training then their 3-year training will already be delivered within a Genetic Service and at the end of this they will be eligible to be awarded statutory regulation with the Health Care Professions Council. Whichever route of training a trainee takes, an individual should remain at a band 6 for a fixed term only. It would be inappropriate for an individual to remain in the Pre-Registration Genetic Counsellor post permanently. However, a permanent post could be adjusted to reflect an initial equivalent training period, e.g. through annex 218. This may also be appropriate to allow a Pre-Registration Genetic Counsellor to progress to autonomous working across all clinical areas competently as deemed by the local employer for a fixed term.

The Pre-Registration Genetic Counsellor post must be under the supervision and mentorship of a Registered Genetic Counsellor who is approved by the Genetic Counsellor Registration Board. The main focus of an applicant’s work must have been clinical (rather than in other areas such as research or education) and should have included a breadth of experience involving both general and cancer cases.

Additional Notes and Guidance

For details of how to train to become a Genetic Counsellor, and eligibility for a Pre-Registration Genetic Counsellor role, refer to AGNC website (agnc.org.uk)9.

Applicants who are uncertain as to whether their post or Genetic Centre fulfils GCRB training standards, and all applicants based outside the UK or Republic of Ireland should contact the GCRB for guidance.

Specialist Genetic Counsellors (e.g. in cancer) can use the general registration process but must demonstrate non-specialist genetic counselling skills.
In accordance with the Genetic Counsellor Registration Board registration process \(^5\) and Academy of Health Care Sciences process \(^10\) (for STP trained Genetic Counsellors), Pre-Registration Genetic Counsellors must:

- Be in a clinical post under the supervision of a recognised Genetics Centre
- During the years of training, work with a varied spectrum of genetic conditions (paediatric, prenatal, adult and cancer genetics) and counselling scenarios (e.g. carrier, predictive, prenatal testing). This may include placements in other accredited Genetic Training Centres
- Receive regular clinical supervision and counselling supervision
- Undergo appraisal with a named educational supervisor on a 6-monthly basis.
- Develop an awareness of the functional structure of Genetics Services and their relationship with other services in the wider NHS

**Roles and Responsibilities**

Supervised management of a case-load of patients/clients requiring genetic counselling

It is anticipated that the nature of case management supervision will change as competencies are achieved. Work will start as observation of clinics, with the aim that by the end of the training period, more autonomous practice has evolved

Work **may** include:

- Independent genetic counselling (including preparation and planning for a consultation)
- With experience, consultations will involve ordering any level of genetic test, interpreting results and delivering these to patients
- Help to triage referrals of patients to the service within their area of expertise, using appropriate protocols
- Post-clinic follow-up as required, including letter writing, referral for screening and cascade testing
- With experience, manage patients that are known or found to have significant psychological, psychiatric, social or legal issues
- Primary responsibility in the management of a genetic register
- Liaising with other health-care professionals and agencies as appropriate
- Blood-taking
- Audit and evaluation projects under the supervision of a Genetic Counsellor/Principal Genetic Counsellor /Consultant Genetic Counsellor or Clinical Geneticist
• Contribution to teaching
• Note: contact with patients may involve home visits, clinic appointments, telephone / video counselling and written communication

Professional Contribution

Involvement in departmental activities
Membership of appropriate professional bodies and attendance at meetings (when work may be presented) etc

Limits of Role

Pre-Registration Genetic Counsellors will not undertake the following independently, but may do so supervised as part of their training and development:

Representing the Genetics Service on an external board/body, unless representation from a ‘Trainee’ is specifically requested. However, Pre-Registration Genetic Counsellors should be encouraged to accompany more senior Genetic Counsellors to meetings of such boards/bodies, to be present as observers

Pre-Registration Genetic Counsellors will not:
• Line-manage staff
• Have any budgetary responsibilities
• Be the sole supervisor for Pre-Registration Genetic Counsellors
• Be the sole supervisor of medical students undertaking special study modules
• Have autonomous triaging of referrals into the Genetics Service
• Will not be responsible for business planning
• Are not expected to lead any strategic operations
• Are not expected to conduct independent complaint investigations or fitness to practice procedures

Trainees will use the title Pre-Registration Genetic Counsellor when communicating with patients.
Band 6 Pre-Registration Genetic Counsellor Job Plan

This job plan is based upon a WTE of 37.5 hours per week broken down into 40 sessions per 4-week cycle (each session = 3.75 hours and will include on average 5 patients if this session is in direct clinical care).

Direct Clinical Care

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sessions per 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Interaction – starting with observation of clinics at the</td>
<td>6 to 12 depending on experience)</td>
</tr>
<tr>
<td>beginning of practice and leading to direct autonomous care when</td>
<td></td>
</tr>
<tr>
<td>experienced enough. This work includes telephone counselling, co-</td>
<td></td>
</tr>
<tr>
<td>counselling clinics, urgent referrals, prenatal referrals, predictive,</td>
<td></td>
</tr>
<tr>
<td>carrier, cascade testing and counselling</td>
<td></td>
</tr>
<tr>
<td>Clinic preparation, record keeping, dictation, letter writing, letter</td>
<td>9</td>
</tr>
<tr>
<td>editing, co-ordination from actions, shorter telephone calls to patients,</td>
<td></td>
</tr>
<tr>
<td>clinical travel</td>
<td></td>
</tr>
<tr>
<td>On-going case and family management, case discussions, clinical</td>
<td>8 – 12</td>
</tr>
<tr>
<td>meetings, MDT meetings, genetic variant interpretation, revision and/or</td>
<td></td>
</tr>
<tr>
<td>follow up of cases</td>
<td>0-4</td>
</tr>
<tr>
<td>Provide specialist/clinical advice to external clinical colleagues</td>
<td>0</td>
</tr>
<tr>
<td>Triage of referrals into the Genetics Service</td>
<td>23- 37</td>
</tr>
<tr>
<td>Total</td>
<td></td>
</tr>
</tbody>
</table>
2. **Non-direct Clinical Care**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sessions per 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching, leadership, managing patient-focused events,</td>
<td>0-1</td>
</tr>
<tr>
<td>involvement in national committees/organisations</td>
<td></td>
</tr>
<tr>
<td>Personal development (e.g. having counselling supervision and appraisals)</td>
<td>3 -12</td>
</tr>
<tr>
<td>and development of others - development, CPD and practice portfolio</td>
<td></td>
</tr>
<tr>
<td>activities</td>
<td></td>
</tr>
<tr>
<td>Service Development e.g. departmental meetings (non-clinical),</td>
<td>0-4</td>
</tr>
<tr>
<td>audit, research, patient pathways, protocols and guidelines,</td>
<td></td>
</tr>
<tr>
<td>leaflets, assisting mainstreaming clinicians</td>
<td></td>
</tr>
<tr>
<td>Management responsibilities</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3-17</strong></td>
</tr>
</tbody>
</table>

Total = 40.0 (the total must not exceed 40 sessions)

It is recognised that some flexibility in role and job plan is essential to meet the needs of the service and also the needs of the individual undergoing training.
Genetic Counsellor

The role profile of Genetic Counsellor is relevant only to those who are working within clinical services (i.e. as yet we have not defined an equivalent ‘research Genetic Counsellor’ position. Such a post might be labelled a ‘senior research assistant’).

At this level, the Genetic Counsellor position has transitioned from higher training to independent work.

From this level onwards, it is envisaged that Genetic Counsellors could take up roles in mainstream services as well as traditional posts in Genetics Services.

Previous Training/Qualifications/Experience

The individual will have achieved the following:

GCRB Registration or Health Care Professionals Council Clinical Scientist (Genomic Counselling) registration

Genetic Counsellors registered overseas may be eligible to register in the UK depending on experience in their home country. For full details please see the Overseas Trained Genetic Counsellors guidelines on the GCRB website.

Roles and Responsibilities

This individual will:

Have responsibility for a range of clinical tasks as outlined in the ‘Roles and Responsibilities’ of the Pre-Registration Genetic Counsellor. In addition, this individual’s work should involve:

- Independent genetic counselling (including preparation and planning for a consultation)
- Consultations will involve ordering any level of genetic test, interpreting results and delivering these to patients
- Help to triage referrals of patients to the service within their area of expertise, using appropriate protocols
• Post-clinic follow-up as required, including letter writing, referral for screening and cascade testing
• Manage patients that are known or found to have significant psychological, psychiatric, social or legal issues
• Responsibility for more challenging cases than at Pre-Registration level
• Responsibility for managing a defined caseload, area or patient group
• Responsibility for a genetic register (where in place)
• Liaising with other health-care professionals and agencies as appropriate
• Blood-taking
• Audit and evaluation projects
• Contribution to teaching
• Delivering (or supporting the delivery of) genetics services in mainstream settings
• Have limited responsibility for the supervision of:
  Pre-Registration Genetic Counsellors
  Medical students/undergraduate students
  New staff
• GCRB registration (Registered GC with approximately 5 years’ experience who have undertaken current GCRB Assessor and Sign-Off Mentoring training may undertake these roles) or AHCS equivalence in future
• Registered Genetic Counsellors with 3 years’ experience can act as a Training Officer for a STP Pre-Registration Genetic Counsellor

Participate in the teaching of genetics to:
• Health care professionals, including hospital doctors and GPs
• Medical students/other students; Patient/public groups
• Contribute to service planning and development and formulation of departmental policies and protocols
• Contribute to formulation of policy and planning of genetics services to mainstream settings in local NHS Trusts
• Contribute to audit and evaluation
• Contribute towards research
• Develop good management and leadership skills across a limited range of responsibilities. These could include the ability to direct the work of students and Pre-Registration Genetic Counsellors
• Have a broad understanding of general management and relationships within the NHS
• Demonstrate ongoing professional development, for example undertaking further education, attending relevant professional conferences/meetings and completing appropriate training courses
• Maintain Genetic Counsellor Registration or HCPC equivalence when available

Professional Contribution

Involvement in departmental and multidisciplinary activities within the local environment
Involvement with appropriate professional bodies through attendance and presentation at meetings, etc.

Limits of Role

The individual will not:

• Line-manage staff
• Have any budgetary responsibilities
• Be the sole supervisor for Pre-Registration Genetic Counsellors
• Be the sole supervisor of medical students undertaking special study modules
• Have autonomous triaging of referrals into the Genetics Service
• Be responsible for business planning
• Lead any strategic operations
• Lead policy development or service implementation
• Conduct independent complaint investigations or fitness to practice procedures
Band 7 Genetic Counsellor Job Plan

This job plan is based upon a WTE of 37.5 hours per week, broken down into 40 sessions per 4-week cycle (session = 3.75 hours).

1. Direct Clinical Care

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sessions per 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Interaction – direct autonomous care including telephone counselling, co-counselling clinics, urgent referrals, prenatal referrals, predictive, carrier, cascade testing and counselling, including specialist MDT clinics</td>
<td>10</td>
</tr>
<tr>
<td>Clinic preparation, record keeping, dictation, letter writing, letter editing, co-ordination from actions, shorter telephone calls to patients, clinical travel</td>
<td>10</td>
</tr>
<tr>
<td>On-going case and family management, case discussions, clinical meetings, MDT meetings, genetic variant interpretation, revision and/or follow up of cases</td>
<td>8</td>
</tr>
<tr>
<td>On call advice, triage of referrals into the Genetics Service (in area of expertise and following protocols); providing specialist/clinical advice to external clinical colleagues</td>
<td>4</td>
</tr>
<tr>
<td>Total</td>
<td>32</td>
</tr>
</tbody>
</table>
2. Non-direct Clinical Care

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sessions per 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching, leadership, managing patient-focused events, involvement in national committees/organisations</td>
<td>2</td>
</tr>
<tr>
<td>Personal development (e.g. having counselling supervision and appraisals) and development of others - development, CPD, maintenance of registration</td>
<td>3</td>
</tr>
<tr>
<td>Service Development e.g. departmental meetings (non-clinical), audit, research, patient pathways, protocols and guidelines, leaflets, assisting mainstreaming clinicians</td>
<td>3</td>
</tr>
<tr>
<td>Management responsibilities</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>8</td>
</tr>
</tbody>
</table>

Total = 40

It is recognised that some flexibility in role and job plan is essential to meet the needs of the service
Principal Genetic Counsellor

This clinical, education or management post is seen as being an expert clinical grade where the post-holder will have substantial experience and training beyond that of a Genetic Counsellor.

As yet we have not spelt out individual roles for the areas of clinical/research/education/management at Principal level but expect that the generic role profile provided can be adapted.

The individual will take independent responsibility for a range of complex work demanding skilled performance, with the ability to identify the need to confer with colleagues.

Previous Training/Qualifications/Experience

This individual will:

- Be a GCRB Registered Genetic Counsellor or hold Health Care Professionals Council Clinical Scientist (Genomic Counselling) registration
- Typically have approximately 5 or more years experience at Registered Genetic Counsellor level
- Have experience in service planning and development, and of the formulation of policies and protocols
- Have experience of audit, evaluation and research
- Show evidence of having developed management and leadership skills
- Have completed additional relevant specialist training
- Show evidence of taking responsibility for organising appropriate teaching and/or research
- Show evidence of professional development

Roles and Responsibilities

Continuing responsibility for a clinical case-load using advanced genetic counselling skills acquired as a Genetic Counsellor, either working in a Genetics Service or in an out-reach position in mainstream healthcare or private practice. The individual will be working at this high level doing any of the following:
• Generic genetic counselling, covering a broad range of genetic conditions and counselling scenarios. The individual will act as a significant resource to the wider health care system and be recognised as an expert within the profession
• Taking a lead role in providing expert genetic counselling in a defined area of specialisation
• Support Pre-Registration Genetic Counsellors and other Genetic Counsellors

In addition they will:

• Continue to take a key role in teaching responsibilities
• Take a key role in the planning, development and provision of cross-disciplinary specialist services, policies and protocols
• Take a lead role in implementing the delivery of genetics services in mainstream settings, and co-ordinating between different services within a region
• Take a lead role in audit and evaluation, and in the supervision of projects undertaken by Genetic Counsellors
• Contribute to the management of a changing and/or developing service
• Maintain Genetic Counsellor Registration (See GCRB Maintenance of Registration Guidelines 11 and Health Care Professions Council)
• Would be expected to act as a GCRB Sign-Off Mentor 12 or Assessor 13 for Genetic Counsellors during their registration process (or AHCS equivalence application in future) following appropriate training
• Participate in the recruitment of staff, but not necessarily lead it
• Take a lead role in the clinical supervision of specialist nurses working in genomics in mainstream setting
• Take a lead role in specialist MDTs as the named genetics clinician thereby acting as a conduit between clinical genetics and other specialities

Professional Contribution

Active participation through:

• Membership of topic groups and specialist interest groups; attendance and presentation at meetings and conferences
• Leadership at a local and national level. This may include holding office on a relevant committee
Limits of Role

Unlike a Consultant Genetic Counsellor, a Principal Genetic Counsellor will not be expected to fulfil all areas of education, research and Genetic Counsellor service leadership responsibility simultaneously. This grade will not be expected to take full managerial responsibility for a department’s Genetic Counsellors.

The individual will not:

- Be responsible for business planning
- Are not expected to lead any strategic operations
- Are not expected to conduct independent complaint investigations or fitness to practice procedures
- Are not expected to lead any change management or strategic implementation
- Are not expected to clinically lead a service
Band 8a Principal Genetic Counsellor Job Plan

This job plan is based upon a WTE of 37.5 hours per week, broken down into 40 sessions per 4-week cycle (session = 3.75 hours).

1. **Direct Clinical Care**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sessions per 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Interaction –direct autonomous care including telephone counselling, co-counselling clinics, urgent referrals, prenatal referrals, predictive, carrier, cascade testing and counselling</td>
<td>6-9</td>
</tr>
<tr>
<td>Clinic preparation, record keeping, dictation, letter writing, letter editing, co-ordination from actions, shorter telephone calls to patients, clinical travel</td>
<td>6-9</td>
</tr>
<tr>
<td>On-going case and family management, case discussions, clinical meetings, MDT meetings, genetic variant interpretation, revision and/or follow up of cases</td>
<td>7</td>
</tr>
<tr>
<td>On-call advice; provides specialist/clinical advice to external clinical colleagues; triage of referrals into the Genetics Service</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>23-29</strong></td>
</tr>
</tbody>
</table>
## 2. Non-direct Clinical Care

<table>
<thead>
<tr>
<th>Activities</th>
<th>Sessions per 4 weeks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teaching, leadership, managing patient-focused events, involvement in national committees/organisations</td>
<td>2-3</td>
</tr>
<tr>
<td>Personal development (e.g. having counselling supervision and appraisals) and development of others - supervision, CPD, maintenance of registration activities</td>
<td>3</td>
</tr>
<tr>
<td>Service Development e.g. departmental meetings (non-clinical), audit, research, patient pathways, protocols and guidelines, leaflets, assisting mainstreaming clinicians</td>
<td>4</td>
</tr>
<tr>
<td>Management responsibilities, doing appraisals for staff, line management and involvement in national committees/organisations</td>
<td>2-7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>11-17</strong></td>
</tr>
</tbody>
</table>

Total = 40 (not exceeding 40)

It is recognised that some flexibility in role and job plan is essential to meet the needs of the service
Consultant Genetic Counsellor

Expert level Genetic Counsellor roles impact beyond the local area of work. Within the NHS these posts are banded across a range of bands 8b to 8d or equivalent. They would be required to fulfil a broad range of areas of service leadership, education, research and strategic direction for the Genetic Counsellor service, both within Genetics Services and in mainstream services. Consultant positions with a large component of research and education leadership may be benchmarked against academic senior lecturer and professorial positions and may not be funded entirely within the NHS. NHS roles with a large component of managing staff may be matched against clinical professional manager national profiles.

Consultant Genetic Counsellor (Clinical)

The individual will act as a significant resource for expert professional advice to the wider health care system and be recognised as an expert within their profession.

This individual will have a lead role locally and nationally in a field of expertise. This role may be broad (generic) or within a specialised area of genetic counselling practice, as defined by the individual’s expertise or the requirements of a particular department.

The individual will undertake clinical work, education and training responsibilities, research and management. At least 40% of their time will be accounted for by their clinical work. The proportion of time spent on other aspects of the role will depend upon the individual’s expertise and the requirements of a particular department.

It is expected that a Clinical Consultant Genetic Counsellor will not undertake the full remit of a Management Consultant Genetic Counsellor concurrently at this level.

Training/Qualifications/Experience

This individual will:

- Be a GCRB Registered Genetic Counsellor or hold Health Care Professionals Council Clinical Scientist (Genomic Counselling) registration
• Typically have approximately 5 years experience as a Principal Genetic Counsellor
• The quality and outcome of experience should reflect the level of clinical and scientific insight and leadership
• Be expected to have gained the highest level of expert knowledge in their area of expertise. It would not be unusual for such a candidate to hold higher postgraduate education e.g. relevant PhD, Clinical Doctorate, or Masters in leadership or management administration
• Have a proven track record of influential research/audit in the field of genetic counselling, as demonstrated by publications/conference presentations
• Be able to demonstrate active involvement with innovative practice developments and demonstrate evidence of significant achievements gained

Roles and Responsibilities

• This grade may take managerial responsibility for the department’s Genetic Counsellors
• Act as lead Genetic Counsellor within area(s) of expertise
• Act as a clinical lead for a named service and be responsible for the delivery outcomes
• Work in partnership with the NHS Trust (or equivalent) in order to develop a strategic approach for the provision of service
• Responsible for proposing, developing and implementing policy for genetic counselling service and establishing how policies should be interpreted
• In line with NHS Trust (or equivalent), develop, lead and implement standards for clinical audit and evaluate clinical effectiveness
• Work in collaboration with academic institutions to lead on education, research and practice development, and produce further publications
• Take a key role in developing national protocols
• Lead on developments and innovations within the field
• Offer specialist consultancy, both within the NHS Trust (or equivalent) and outside
• Maintain Genetic Counsellor Registration
Contribute to the following management activities:

- Appraisal/review of staff within their team
- Identifying and facilitating educational and training needs of staff
- Will often provide support and mentoring for Pre-Registration Genetic Counsellors, Genetic Counsellors and Principal Genetic Counsellors
- May be expected to act as a GCRB Sign-Off Mentor or Assessor for Genetic Counsellors during the registration process or AHCS equivalence process in future following appropriate training
- Budget management, business planning, clinical governance
- Performance management and safe practice
- Service delivery and implementation
- Fitness to practice proceedings

Professional Contribution
Maintain national and international profile of the genetic counselling profession. Will be active nationally in specialist subject area (or areas), and will participate in national meetings and hold membership of organising bodies or professional committees. The individual may hold an office in such a committee within the profession or within a multidisciplinary group, and/or be active internationally.

Limits of Role
Will refer as appropriate to other Genetic Counsellors/Clinical Geneticists/laboratory scientists, etc. who have other areas of expertise

Consultant Genetic Counsellor (Management)

A Lead Genetic Counsellor / Genetic Counsellor Manager will primarily have management and training responsibilities, but at least 25% of her/his time will be accounted for by their clinical caseload. The proportion of time spent on other aspects of the role will depend upon the individual’s expertise or the requirements of a particular department.

This role will demand effective leadership and could involve managing groups extending beyond Genetic Counsellor personnel. It could provide management opportunities and experience appropriate to the pursuance of Departmental or Directorate level Management posts.

It is expected that a Clinical Consultant Genetic Counsellor will not undertake the full remit of a Management Consultant Genetic Counsellor concurrently at this level.
**Training/Qualifications/Experience**

This individual will:

- Be a GCRB Registered Genetic Counsellor or hold Health Care Professionals Council Clinical Scientist (Genomic Counselling) registration
- Typically have approximately 5 years’ experience as a Principal Genetic Counsellor
- The quality and outcome of experience should reflect the level of clinical and scientific insight, management skills and insight and leadership
- It would not be unusual for such a candidate to hold higher postgraduate education e.g. relevant PhD, Clinical Doctorate, or Masters in leadership or management administration
- Have relevant management experience and training, which may include a recognised post graduate management qualification
- Be able to demonstrate an active involvement with innovative practice developments and demonstrate evidence of significant achievements gained

**Roles and Responsibilities**

- Provide line management and professional leadership for the team of Genetic Counsellors at various stages of training and experience, ensuring staff are supported in their work
- Define the standard of care to be provided by Genetic Counsellors and delegate duties and workloads whilst being responsible for maintaining standards and competencies at various levels
- Responsible for disciplinary procedures whenever necessary
- Recruitment of Genetic Counsellors (and other members of staff as agreed locally)
- Appraisal and staff development programmes of all grades of Genetic Counsellors (and where appropriate other members of staff as agreed locally)
- Identify and facilitate educational and training needs of staff, including managing training budget for Genetic Counsellors
- Providing support and mentoring for Pre-Registration Genetic Counsellors, Genetic Counsellors and Principal Genetic Counsellors
- Work in partnership with the NHS Trust and/or other relevant bodies to develop a strategic approach for the provision of service, including business planning and contract negotiation
- In line with NHS Trust (or equivalent), develop, lead and implement standards for clinical audit and evaluate clinical effectiveness including clinical risk management
- Systematically introduce, manage, evaluate and consolidate service changes
• Take a key role in developing management protocols
• Maintain Genetic Counsellor Registration Would be expected to act as a GCRB Sign-Off Mentor $^{12}$ or Assessor$^{13}$ for Genetic Counsellors during their registration process or AHCS equivalence process in future following appropriate training if required

**Professional Contribution**

Contribute to national and international profile of the genetic counselling profession.

Will participate in national meetings and hold membership of organising bodies or professional committees. The individual may hold an office in such a committee within the profession or within a multidisciplinary group, and/or be active internationally.

**Limits of role**

• Refer/defer to other Genetic Counsellors/Clinical Geneticists/laboratory scientists, etc, who have specific areas of expertise, as appropriate
• Would not be expected to maintain the same daily clinic workload or level of clinical expertise as Consultant Genetic Counsellor (Clinical) post

**Consultant Genetic Counsellor (Research)**

A Consultant Research Genetic Counsellor is unlikely to be based in the NHS at the present time and more likely to be employed by a university or academic institution. Thus the title is honorary. It is only to be used by researchers who have maintained their GCRB registration and have, at one point in time, worked clinically as a Genetic Counsellor.

This role demands global thought leadership within the genetic counselling profession. Evidenced by peer reviewed publication and grants.

**Training/Qualifications/Experience**

This individual will:
• Be a GCRB Registered Genetic Counsellor or hold Health Care Professionals Council Clinical Scientist (Genomic Counselling) registration
• Typically have approximately 5 years’ experience as a Principal Genetic Counsellor or Principal Investigator
• Be educated to PhD level within genetics, psychology, genetic counselling or a relevant related subject
• Be able to demonstrate senior lecturer or professor level benchmarking to academic positions

Roles and Responsibilities

• Provide research leadership within genetic counselling
• Define the empirical and theoretical evidence base to guide the practice of genetic counselling
• Identify and facilitate educational and training needs of staff, including managing budget for research
• Provide research support to Genetic Counsellors
• Work in partnership with clinical and policy services for genetic counselling
• Take a key role in policy development around genetic counselling
• Maintain Genetic Counsellor Registration

Professional Contribution

Contribute to national and international profile of the genetic counselling profession
Will be active internationally and will participate in national meetings and hold membership of organising bodies or professional committees. The individual may hold an office in such a committee within the profession or within a multidisciplinary group, and/or be active internationally

Limits of role

Refer/defer to other Genetic Counsellors/Clinical Geneticists/laboratory scientists, etc, who have specific areas of expertise, as appropriate
Would not be expected to maintain any clinical workload
Agenda for Change Profile: Genetic Counsellor Trainee

Job Statement:
Undertakes genetic counselling under the guidance of a more senior genetic counsellor and maintains relevant records
Attends genetic counselling clinics and carries out home visits
Working towards registration with professional body
<table>
<thead>
<tr>
<th>Factor</th>
<th>Relevant Job Information</th>
<th>JE Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Communication and Relationship Skills</td>
<td>Provide and receive highly complex, sensitive or contentious information; barriers to understanding; provide and receive complex, sensitive information hostile, antagonistic or highly emotive atmosphere Elicits highly sensitive information relating to e.g. prenatal carrier testing, inherited genetic testing where there is resistance to the notion of genetic inheritance and a need to reassure and empathise with the patient/client; communicates sensitive information where patients/clients may be hostile</td>
<td>5(a)(c)</td>
</tr>
<tr>
<td>2. Knowledge, Training &amp; Experience</td>
<td>Specialist knowledge across range of procedures underpinned by theory Professional knowledge acquired through relevant degree plus clinical experience and counselling training or equivalent to postgraduate diploma level</td>
<td>6</td>
</tr>
<tr>
<td>3. Analytical &amp; Judgmental Skills</td>
<td>Range of facts or situations requiring analysts Initial assessment of patient/client's family tree and history where risk factors are analysed and judgements made on testing and reporting of results</td>
<td>3</td>
</tr>
<tr>
<td>4. Planning &amp; Organisational Skills</td>
<td>Plan and organise straightforward activities, some ongoing Manages ongoing caseload of patients/clients</td>
<td>2</td>
</tr>
<tr>
<td>5. Physical Skills</td>
<td>Highly developed physical skills, accuracy important; manipulation of fine tools, materials Hand eye co-ordination, accuracy required when carrying out e.g. venepuncture,</td>
<td>3 (b)</td>
</tr>
<tr>
<td>6. Responsibility for Patient/Client Care</td>
<td>Develop programmes of care; provide specialist clinical technical services Arranges appropriate screening and testing programme, counsels accordingly; interprets diagnostic test results</td>
<td>5(a)(b)</td>
</tr>
</tbody>
</table>
| 7. Responsibility for Policy/Service Development | Follows policies in own role, may be required to comment  
Follows national and organisational policies applicable to role, may comment on departmental procedures | 1 |
| 8. Responsibility for Financial & Physical Resources | Personal duty of care in relation to equipment, resources  
Careful use of genetic counselling facilities | 1 |
| 9. Responsibility for Human Resources | Demonstrate own duties  
Demonstrates own duties to others | 1 |
| 10. Responsibility for Information Resources | Record personally generated information  
Maintains patient/client records | 1 |
| 11. Responsibility for Research & Development | Undertake surveys and audits, as necessary to own work/regularly undertake R&D activities  
Completes regular activity audits and caseload statistics, participates in local, regional or national research projects | 1-2(a) |
| 12. Freedom to Act | Clearly defined occupational policies, work is managed rather than supervised  
Works with patients/clients independently within codes of conduct and policies, work is assessed during clinical supervision | 3 |
| 13. Physical Effort | Combination of sitting, standing, walking  
Walks between clinics, sits during assessments | 1 |
| 14. Mental Effort | Frequent intense concentration  
In-depth proactive mental attention during patient/client risk assessment and counselling | 5 |
| 15. Emotional Effort | Frequent distressing or emotional circumstances, occasional/frequent highly distressing  
Counselling the terminally ill or bereaved where there is a need for genetic testing/dealing with challenging family | 3(a)(b)-4(b) |
| 16. Working Conditions | Occasional/frequent unpleasant/occasional/frequent highly unpleasant conditions  
Body odours, exposure to blood during venepuncture | 2(a)  
3(b)  
4(b) |
<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>JE Score/Band</td>
<td>JE Score 398 – 423</td>
<td>Band 6</td>
</tr>
</tbody>
</table>
Agenda for Change Profile: Genetic Counsellor

Job Statement:
Assesses and provides genetic counselling to patients/clients
Manages a caseload and maintains patient/client records
Provides support and guidance to students and less experienced genetic counsellors
<table>
<thead>
<tr>
<th>Factor</th>
<th>Relevant Job Information</th>
<th>JE Level</th>
</tr>
</thead>
</table>
| 1. Communication and Relationship Skills        | Provide and receive highly complex, sensitive or contentious information; barriers to understanding; provide and receive complex, sensitive information hostile, antagonistic or highly emotive atmosphere  
Elicits highly sensitive information relating to e.g. prenatal carrier testing, inherited genetic testing where there is resistance to the notion of genetic inheritance and a need to reassure and empathise with the patient/client; communicates sensitive information where patients/clients may be hostile | 5(a)(c)  |
| 2. Knowledge, Training & Experience             | Specialist knowledge across range of procedures underpinned by theory  
Knowledge of genetic counselling procedures and techniques acquired through relevant degree plus clinical experience and counselling training plus further specialist training to master's level equivalent | 7        |
| 3. Analytical & Judgmental Skills               | Complex facts or situations requiring comparison of a range of options  
Initial assessment of patient/client's family tree and complex history where risk factors are analysed and judgements made on testing, reporting of results and referral to specialist | 4        |
| 4. Planning & Organisational Skills             | Plan and organise straightforward activities, some ongoing/complex activities requiring formulation, adjustment  
Manages ongoing caseload of patients/clients, co-ordinates multi-disciplinary case conferences | 2-3      |
| 5. Physical Skills                              | Highly developed physical skills, accuracy important; manipulation of fine tools, materials  
Hand eye co-ordination, accuracy required when carrying out e.g. venepuncture, | 3 (b)    |
<table>
<thead>
<tr>
<th></th>
<th>Responsibility for Patient/Client Care</th>
<th>Develop programmes of care; provide highly specialist clinical technical services Arranges appropriate specialist screening and testing programme, counsels accordingly; interprets complex diagnostic test results</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>7.</td>
<td>Responsibility for Policy/Service Development</td>
<td>Follows policies in own role, may be required to comment/implement policies and propose changes to practices, procedures for own area Follows national and organisational policies/implements policies related to provision of genetic counselling service, proposes changes to service delivery and working practices</td>
<td>1-2</td>
</tr>
<tr>
<td>8.</td>
<td>Responsibility for Financial &amp; Physical Resources</td>
<td>Personal duty of care in relation to equipment, resources Careful use of genetic counselling facilities</td>
<td>1</td>
</tr>
<tr>
<td>9.</td>
<td>Responsibility for Human Resources</td>
<td>Professional, clinical supervision Supports and mentors trainees, students undertaking placements</td>
<td>2(b)</td>
</tr>
<tr>
<td>10.</td>
<td>Responsibility for Information Resources</td>
<td>Records personally generated information Maintains patient/client records</td>
<td>1</td>
</tr>
<tr>
<td>11.</td>
<td>Responsibility for Research &amp; Development</td>
<td>Undertake surveys and audits, as necessary to own work/regularly undertake R&amp;D activities Completes regular activity audits and caseload statistics, participates in local, regional and national research projects</td>
<td>1-2(a)</td>
</tr>
<tr>
<td>12.</td>
<td>Freedom to Act</td>
<td>Clearly defined occupational policies, work is managed rather than supervised/broad occupational policies Works within professional guidelines/works autonomously, lead practitioner, own caseload in the community</td>
<td>3-4</td>
</tr>
<tr>
<td>13.</td>
<td>Physical Effort</td>
<td>Combination of sitting, standing, walking Walks between clinics, sits during assessments</td>
<td>1</td>
</tr>
</tbody>
</table>
| 14. Mental Effort     | Frequent intense concentration  
|                      | In-depth proactive mental attention during patient/client risk assessment and counselling | 5 |
| 15. Emotional Effort | Frequent distressing or emotional circumstances, occasional/frequent highly distressing  
|                      | Counselling the terminally ill or bereaved where there is a need for genetic testing/dealing with challenging family situations e.g. paternity identification, morbidity or mortality risk assessment | 3(a)(b)-4(b) |
| 16. Working Conditions | Occasional/frequent unpleasant/occasional/frequent highly unpleasant conditions  
|                      | Body odours, exposure to blood during venepuncture | 2(a) 3(b) 4(b) |
| JE Score/Band       | JE Score 469 – 524 | Band 7 |
Agenda for Change Profile: Genetic Counsellor Principal

Job Statement:
Assesses and provides specialist genetic counselling to patients/clients
Manages a specialist caseload and maintains patient/client records
Maintains a knowledge of the scientific medical and psychological aspects of clinical genetics and provides support and guidance to students, Genetic Counsellors and other health professions
Provides specialist training, may lead a specialist team
<table>
<thead>
<tr>
<th>Factor</th>
<th>Relevant Job Information</th>
<th>JE Level</th>
</tr>
</thead>
</table>
| 1. Communication and Relationship Skills                             | Provide and receive highly complex, sensitive or contentious information; barriers to understanding; present complex, sensitive or contentious information to large groups; provide and receive complex, sensitive information hostile, antagonistic or highly emotive atmosphere  
Elicits highly sensitive information relating to e.g. prenatal carrier testing, inherited genetic testing where there is resistance to the notion of genetic inheritance and a need to reassure and empathise with the patient/client; gives presentations at conferences; communicates sensitive information where patients/clients may be hostile | 5(a)(b)(c) |
| 2. Knowledge, Training & Experience                                   | Highly developed specialist knowledge, underpinned by theory and experience  
Knowledge of genetic counselling procedures and techniques acquired through relevant degree plus clinical experience and counselling training plus further specialist training to master’s level equivalent | 7        |
| 3. Analytical & Judgmental Skills                                     | Complex/highly complex facts or situations requiring analysis, interpretation, comparison of a range of options  
Initial assessment of patient/client’s family tree and history where complicated risk factors are analysed, test results interpreted and judgements made/expert opinions may differ | 4-5      |
| 4. Planning & Organisational Skills                                  | Plan and organise complex activities or programmes, requiring formulation, adjustment  
Plans and organises multidisciplinary clinics and meetings, organises student work placements | 3        |
| 5. Physical Skills                                                    | Highly developed physical skills, accuracy important; manipulation of fine tools, materials  
Hand eye co-ordination, accuracy required when carrying out e.g. venepuncture, | 3 (b)    |
| 6. Responsibility for Patient/Client Care | Develop specialised programmes of care; provide highly specialist clinical technical services  
Arranges appropriate specialist screening and testing programme, interprets diagnostic test results and advises accordingly | 6(a)(b) |
|-----------------------------------------|-------------------------------------------------------------------------------------------------|---|
| 7. Responsibility for Policy/Service Development | Propose policy or service, impact beyond own area  
Develops policies in area of specialism which impact on other disciplines e.g. genetic testing in childhood | 3 |
| 8. Responsibility for Financial & Physical Resources | Personal duty of care in relation to equipment, resources  
Careful use of genetic counselling facilities | 1 |
| 9. Responsibility for Human Resources | Day to day management, allocate, place and supervise staff or students, teach/deliver specialist training/teach, devise programmes as major job responsibility  
Undertakes placement programmes for students, provides specialist training in area of expertise | 3(a)(b)  
(c)  
4(c) |
| 10. Responsibility for Information Resources | Record personally generated information  
Maintains patient/client records | 1 |
| 11. Responsibility for Research & Development | Regularly undertake R&D activities/major job requirement  
Participates in local, regional, national research projects | 2(a) - 3 |
| 12. Freedom to Act | Broad occupational policies  
Interprets policies in relation to own specialist caseload | 4 |
| 13. Physical Effort | Combination of sitting, standing, walking  
Walks between clinics, sits during assessments | 1 |
| 14. Mental Effort | Frequent intense concentration  
In-depth proactive mental attention during patient/client risk assessment and counselling | 5 |
| 15. Emotional Effort                                      | Frequent distressing or emotional circumstances, occasional/frequent highly distressing  
Counselling the terminally ill or bereaved where there is a need for genetic testing/dealing with challenging family situations e.g. paternity identification, morbidity/mortality risk assessment | 3(a)(b)-4(b) |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------|--------------|
| 16. Working Conditions                                   | Occasional/frequent unpleasant/occasional/frequent highly unpleasant conditions  
Body odours, exposure to blood during venepuncture | 2(a)  
3(b)  
4(b) |
| JE Score/Band                                            | JE Score 524* - 580                                                                            | Band  
*8a |
Agenda for Change Profile: Genetic Counsellor Consultant

Job Statement:
Provides expert professional advice to patients/clients, colleagues and other health professionals
Acts as lead Genetic Counsellor in field of expertise
Collaborates with academic institutions to lead on education, research and practice development
Provides specialist consultancy within organisation and externally
<table>
<thead>
<tr>
<th>Factor</th>
<th>Relevant Job Information</th>
<th>JE Level</th>
</tr>
</thead>
</table>
| 1. Communication and Relationship Skills   | Provide and receive highly complex, sensitive or contentious information; barriers to understanding; present complex, sensitive or contentious information to large groups; provide and receive complex, sensitive information hostile, antagonistic or highly emotive atmosphere  
Elicits highly sensitive information relating to e.g. prenatal carrier testing, inherited genetic testing where there is resistance to the notion of genetic inheritance and a need to reassure and empathise with the patient/client; gives presentations at conferences; communicates sensitive information where patients/clients may be hostile | 5(a)(b)(c) |
| 2. Knowledge, Training & Experience        | **Advanced theoretical and practical knowledge**  
Professional knowledge acquired through degree, supplemented by specialist training to masters’ level, PhD or equivalent. Highest level of specialist knowledge in own area                                                                                                               | 8(a)     |
| 3. Analytical & Judgmental Skills          | **Highly complex facts or situations requiring analysis, interpretation, comparison of a range of options**  
Initial assessment of patient/client's family tree and highly complex history where complicated risk factors are analysed, test results interpreted and judgements made in unique situations or where opinion differs                                                                 | 5        |
| 4. Planning & Organisational Skills        | **Plan and organise broad range of complex activities or programmes, formulates, adjusts plans or strategies**  
Develops strategy, service planning                                                                                                                                                                                                                                                      | 4        |
| 5. Physical Skills                         | **Highly developed physical skills, accuracy important; manipulation of fine tools, materials**  
Hand eye co-ordination, accuracy required when carrying out e.g. venepuncture,                                                                                                                                                                                                           | 3 (b)    |
| 6. Responsibility for Patient/Client Care | Develop specialised programmes of care; provide highly specialist clinical technical services  
Arranges appropriate specialist screening and testing programme, interprets diagnostic test results and advises accordingly | 6(a)(b) |
| 7. Responsibility for Policy/Service Development | Responsible for policy implementation and development for a service  
Responsible for proposing, developing and implementing policy changes for genetic counselling service | 4 |
| 8. Responsibility for Financial & Physical Resources | Personal duty of care in relation to equipment, resources/authorised signatory, small payments  
Careful use of genetic counselling facilities/signatory for expenses | 1-2(d) |
| 9. Responsibility for Human Resources | Teach/deliver specialist training/teach, devise training and development programmes, major job responsibility  
Provides specialist training & education/develops education programmes | 3(c)-4(b) |
| 10. Responsibility for Information Resources | Record personally generated information  
Maintains patient/client records | 1 |
| 11. Responsibility for Research & Development | R&D activity as major job requirement/co-coordinate, implement R&D activity as job requirement  
Involved in research projects on an ongoing basis/supervises collection of data and management of research projects | 3-4 |
| 12. Freedom to Act | General policies, need to establish interpretation  
Responsible for establishing how policies should be interpreted | 5 |
| 13. Physical Effort | Combination of sitting, standing, walking  
Walks between clinics, sits during assessments | 1 |
| 14. Mental Effort | Occasional/frequent intense concentration  
In-depth proactive mental attention during patient/client risk assessment and counselling | 4(b)-5 |
|-------------------|-------------------------------------------------------------------------------------------------|--------|
| 15. Emotional Effort | Frequent distressing or emotional circumstances, occasional/frequent highly distressing  
Counselling the terminally ill or bereaved where there is a need for genetic testing/dealing with challenging family situations e.g. paternity identification, morbidity/mortality risk assessment | 3(a)(b)-4(b) |
| 16. Working Conditions | Occasional/frequent unpleasant/occasional highly unpleasant conditions  
Body odours, exposure to blood during venepuncture | 2(a)  
3(a)(b) |
| JE Score/Band | JE Score 627 – 675 | Band 8b-c-d |
Agenda for Change Profile: Professional Manager (Clinical/Clinical Technical Service)

**Job Statement:**
Manages staff, including recruitment, appraisal, CPD, performance  
Responsible for policy & service development  
Accountable for service delivery: liaises with other agencies as appropriate  
Responsible for budget & physical resources
<table>
<thead>
<tr>
<th>Factor</th>
<th>Relevant Job Information</th>
<th>JE level</th>
</tr>
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| 1. Communication & Relationship Skills    | Provide and receive highly complex, sensitive or contentious information; barriers to understanding; present complex, sensitive or contentious information to large groups/ significant barriers to acceptance; hostile, antagonistic or highly emotive atmosphere
Communicates service-related information to senior managers, staff, external agencies: requires negotiating, persuasive, motivational, reassurance skills; gives formal presentations/ manage and reconcile conflicting views where there are significant barriers to acceptance or understanding | 5-6      |
| 2. Knowledge, Training & Experience        | Advanced theoretical & practical knowledge                                                                                                                                                                                                                                                                                                                  | 8(a)     |
| 3. Analytical & Judgmental Skills          | Highly complex facts or situations requiring analysis, interpretation comparison of a range of options
Skills for analysing service, client, organisational, staffing issues                                                                                                                                                                                                                       | 5        |
| 4. Planning & Organisational Skills       | Plan and organise broad range of complex activities; formulates, adjusts plans, strategies
Operational planning of service, business planning                                                                                                                                                                                                                                        | 4        |
| 5. Physical Skills                         | Physical skills obtained through practice; Developed physical skills; advanced keyboard use; Highly developed physical skills, accuracy important; manipulation of fine tools materials
Driving, keyboard skills/ skills needed for professional practice, requiring accuracy and/or speed required for professional practice                                                                                                                                                   | 2-3      |
\(\text{(a)(b)}\)
| 6. Responsibility for Patient/Client Care | Accountable for direct delivery of clinical, technical and social care service(s)  
Accountable to trust for delivery of service | 7 |
|-----------------------------------------|--------------------------------------------------------------------------------|---|
| 7. Responsibility for Policy/Service Development | Responsible for policy implementation & development for a service/ Responsible for policy implementation & development for a directorate or equivalent  
Responsible for proposing & implementing service/departmental policies/ responsible for policy implementation and service development for a directorate or equivalent | 4-5 |
| 8. Responsibility for Financial & Physical Resources | Budget holder for department/service; procurement of physical assets or supplies for department/service/ responsible for budget for several services  
Holds budget; procures capital equipment, supplies/ holds budgets for several Services | 4 (a)(c) |
| 9. Responsibility for Human Resources | Line manager for single function or department/ several/ multiple departments  
Manages staff of department/ directorate or equivalent including recruitment career development, performance, work evaluation | 4-5(a) |
| 10. Responsibility for Information Resources | Records personally generated information  
Updates patient/client, work records | 1 |
| 11. Responsibility for Research & Development | Regularly undertakes R&D activity; R&D as major job requirement; coordinate, implement R&D activity as job requirement  
Undertakes research; carries out research as major job requirement/ co-ordinates and implements R & D programmes | 2-4 |
| 12. Freedom to Act | General policies, need to establish interpretation  
Operates independently, manages department, interprets organisational policies | 5 |
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| **13. Physical Effort** | Combination of sitting, standing, walking; Frequent light effort for short periods; occasional/ frequent moderate for several short periods  
Effort required for carrying out clinical/ technical duties | 1/ 2(b); (d)/ 3 (c) |
| **14. Mental Effort** | Frequent concentration, work pattern unpredictable  
Concentration for e.g. analysis, writing reports, meetings, patient/client assessment, interruptions to deal with service issues | 3(a) |
| **15. Emotional Effort** | Occasional distressing / highly distressing or emotional circumstances  
Deals with staff problems, patient complaints, conveys unwelcome news/ unexpected deaths | 2-3(b) |
| **16. Working Conditions** | Occasional/frequent unpleasant conditions  
Conditions relating to carrying out clinical/technical duties | 2-3 |

JE Score/Band JE Score 641-748 Band 8c-9
References

Genetic Counsellor Registration Board, December 2018. Accessible at: http://www.gcrb.org.uk/
Academy for Healthcare Science Register, December 2018. Accessible at: https://www.ahcs.ac.uk/the-register/overview-the-register/
Genetic Counsellor Registration Board - Sign-off mentors, December 2018. Accessible at: http://www.gcrb.org.uk/sign-off-mentors/
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Laura Boyes, AGNC committee member And the AGNC Committee

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Anna Middleton, AGNC chair
Athalie Melville, AGNC secretary
With input and endorsement from the Lead Genetic Counsellors across the UK as well as the 2019 AGNC Committee