Internship Guidelines

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COURSE LISTINGS

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<tr>
<th>Internship Type</th>
<th>Course Code</th>
<th>Duration</th>
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<tbody>
<tr>
<td>Summer Internship</td>
<td>BIOL212A</td>
<td>one 30 day internship</td>
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<tr>
<td>Fall Internships</td>
<td>BIOL212B</td>
<td>two 14 day internships</td>
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<tr>
<td>Spring Internships</td>
<td>BIOL212C</td>
<td>two 14 day internships</td>
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OVERVIEW:
The M.S. in Genetic Counseling Program is a 2-year program that is fully accredited by the Accreditation Council for Genetic Counseling (ACGC). In the second year, students gain direct experience guided by the ACGC’s practice-based competencies of genetic counselors through a series of internships. Some internships focus on direct patient interaction, while others will emphasize the development of skills outside of clinical care, or a combination of both (hybrid internship). Each student completes one 30 day summer internship and four 14 day internships during the academic year. The summer internship is patient-focused in one of the three fundamental practice areas (prenatal, pediatrics, or cancer). During the academic year, students will complete at least one patient-focused 7 week internship in the remaining fundamental practice areas and one 7 week internship with a laboratory focus. The remaining internship will be determined based upon student interest and site availability. Possible options include an additional internship in a fundamental area, specialty clinic, advocacy organization, research, or industry.

SCHEDULE:
For the summer internship, the schedule is determined by the supervising site and student. For internships during the academic year, students generally attend each internship bi-weekly for seven weeks. The students do not receive compensation for these internships and are given course credit. Students are expected to make up time missed due to weather, illness, or other scheduling difficulties.

STUDENT RESPONSIBILITIES
For all internships that involve patient interaction:
By the completion of their training, students are required to see a minimum of 50 core cases under the supervision of a board-certified genetic counselor or medical geneticist. The breakdown of these cases should approximately represent current trends in genetic counselor employment, as referenced by the ABGC Practice Analysis (40% prenatal, 25% cancer, 25% pediatrics, 10% adult). This translates to approximately 20 prenatal
cases, 13 cancer cases, 13 pediatric cases, and 5 adult cases. These are the minimum requirements and it is expected that students will see more than the minimum number of cases during the course of their training.

To be considered a “core case,” the clinical interaction must occur face-to-face and active student participation in at least one role in each of the fundamental areas of genetic counseling (management, education, counseling) must be documented. By the end of their training, students should have experience in all of the fundamental counseling roles:

- **Management Roles:**
  - **Case preparation**: reviewing all relevant information about the client and the indication for genetic counseling prior to the session
  - **Collection/documentation of medical, developmental, and/or pregnancy history**: eliciting pertinent medical information
  - **Collection/documentation of family history/pedigree**: eliciting a multi-generation family history and constructing pedigree
  - **Risk assessment**: evaluation of patient history to determine recurrence/occurrence risks
  - **Evaluation/coordination of genetic testing**: determining appropriate genetic test(s), evaluating laboratories, and/or coordination of testing
  - **Clinical documentation** (clinic notes, letters): summarizing content of patient interaction
  - **Follow-up (calls, referrals)**: conducting further literature review, addressing ongoing concerns, referrals

- **Education Roles:**
  - **Develop a counseling plan**: make agenda that includes pertinent education issues to address
  - **Inheritance pattern**: educating patients about modes of inheritance
  - **Risk counseling**: educating patients about personal/familial risks
  - **Diagnosis/prognosis/natural history**: conveying information about the diagnosis, etiology, natural history, and prognosis of a genetic condition and/or birth defect
  - **Medical management/prevention/treatment**: discussing medical management, prevention, and/or treatment of genetic conditions and/or birth defects
  - **Genetic and/or prenatal testing**: explaining the technical and medical aspects of diagnostic screening methods and reproductive options, including associated risks, benefits, limitations
  - **Results disclosure**: interpreting results, discussing results with patient (can involve the development of teaching aids and the provision of educational materials)
  - **Research options/consenting**: discussing research opportunities and/or consenting a patient for a study

- **Counseling Roles**
  - **Establishing rapport/contracting**: initiating the genetic counseling session, eliciting client concerns/expectations, establishing agenda
  - **Psychosocial assessment**: eliciting and evaluating psychosocial history
- **Psychosocial support/counseling**: providing psychosocial support and anticipatory guidance
- **Resource identification/referral**: helping the client identify support groups and other resources in the community
- **Case processing/self-assessment/self-reflection**: discussing the session to identify strengths and areas of improvement

A student in the early part of his/her training should be directly supervised at all times. Patients seen by students should be selected based upon the student’s experience level and at the discretion of the supervisor. The expectation is that the student’s skill acquisition will be incremental and that their counseling skills will increase in complexity over the course of their clinical training. Even at the beginning of their first internship, students are often able to take on basic counseling roles for complex sessions, with the addition of more responsibility as they gain experience. After the student consistently achieves specific skills, the focus of direct supervision is expected to position the student to develop not-yet achieved or emerging skills.

The supervisor may give a student other assignments to be completed outside of normal working hours. These tasks should take no more than a few hours per week. Students should not be used to compensate for inadequate genetic counselor or administrative staffing levels.

**For internships that do not involve patient interaction:**
These experiences aim to expose students to how genetic counselors can utilize their skills outside of direct patient care and to develop a more global understanding of how the roles of all genetic professionals intersect, while also building upon the following skills:

- **Communication:**
  - **Oral**: explaining scientific or medical information to other individuals verbally either individually or in a group setting
  - **Written**: documentation of scientific or medical information for a variety of audiences
  - **Listening Skills**: employing active listening and interviewing skills to identify, assess, and respond to situations at hand

- **Knowledge:**
  - **Medical**: natural history, diagnosis, prognosis, and/or treatment
  - **Genetic**: etiology, molecular basis, inheritance pattern
  - **Genetic Testing**: process, test interpretation, reporting
  - **Psychosocial**: understanding of the patient experience

- **Information Management**
  - **Resource Identification**: Identification and critical assessment of resources of use to either medical providers, lay public, or patients
  - **Literature review**: Identification and critical assessment of material in peer-reviewed journals
The specific activities of these internships will vary depending upon the internship site. The chart below summarizes activities that a student may encounter in a given internship:

<table>
<thead>
<tr>
<th>Laboratory</th>
<th>test accessioning, test interpretation, reporting, documentation of results, communication of information with ordering providers/patients, attendance at team meetings, creation of marketing materials, literature review</th>
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<tbody>
<tr>
<td>Advocacy</td>
<td>resource development, organization of hearings/testimonies/bills, event planning/outreach, creation of marketing materials, social media promotion.</td>
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<tr>
<td>Research</td>
<td>maintenance/development of IRB protocols, recruitment, data analysis, preparation of manuscripts/posters, attendance at team meetings, development of educational materials, literature review</td>
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**SUPERVISOR RESPONSIBILITIES:**

The student will have a primary on-site supervisor to guide and advise her/him during the internship. This does not preclude working with and receiving guidance from other staff members. The primary purpose of supervision is to create dialog regarding the expectations of both the supervisor(s) and the student as well as provide ongoing feedback on performance. **Ideally, the student will meet with the primary supervisor weekly for approximately one hour.**

Brandeis University provides the following to internship supervisors:

- A fixed compensation amount that can be used to purchase items for their own professional development such as books, educational tools, meeting registration, or professional dues.
- Invitation to optional periodic supervisor workshops, which can be attended for continuing education credits (CEUs)
- Professional activity credits (PACs). Supervisors can receive 0.5 PAC for a minimum of 25 hours of direct supervision.
- Brandeis University faculty appointment as an Adjunct Instructor. In the capacity of an Adjunct Instructor, a supervisor should spend at least 3-4 hours per week in supervisory activities including approximately one-hour per week in direct individual supervision.

Supervisors who would like documentation to obtain PACs and/or would like to have an appointment as an Adjunct Instructor should contact Lauren Lichten.

**DOCUMENTATION**

The student and supervisor should complete the following documents during the course of the internship:

- **Learning Contract:** This document is completed on the first day of the internship. The student documents their prior experiences, strengths, and goals for the internship. The supervisor and student then document the student responsibilities and goals to be achieved by the midterm and final evaluation. The student should e-mail Lauren Lichten a signed digital copy of this document.

- **Internship Journal:** All students will maintain an online journal to document their internship activities. If the day was focused on patient care, the student should indicate which entries in the case log should
be referenced. The student should also document other learning opportunities that occurred during the day (for example cases observed, lectures attended, phone calls, projects, etc.). For internships that do not focus on patient care, the student should document (in one paragraph) how their day was spent and indicate which skills were strengthened through this activity. The supervisor will be granted access to the student’s online case journal for the duration of the internship. The student is expected to complete the journal in a timely fashion and the supervisor should review their progress regularly.

- **Case log (for patient interactions):** For all patient interactions (even if it is an internship outside of the three fundamental areas), students are expected to complete their online case log to document which fundamental genetic counseling roles were performed, strengths of the interaction, areas for improvement, and supervisor feedback. No identifying patient information should be recorded. The supervisor will be granted access to the student’s online case log for the duration of the internship. The student is expected to complete the case log in a timely fashion and the supervisor should review their progress regularly.

- **Midterm Evaluation:** This document should be completed at the halfway point of the internship. The student is rated using a 4-point scale (excellent, good, fair, poor) on 14 items (assertiveness, attitude toward work, critical thinking, dependability, flexibility, interactions with others, knowledge, listening skills, oral communication, professionalism, self-assessment, time management, quality of work, writing). The supervisor provides a short qualitative assessment of the student strengths/areas of improvement and will document whether the student is meeting the learning objectives of the internship. If the student is not meeting the learning objectives of the internship, the supervisor should provide specific information about what deficiencies the student must address to meet the learning objectives of the internship. The student should e-mail Lauren Lichten a signed digital copy of this document.

- **Final Evaluation:** This document should be completed on the final day of the internship. The student is rated on the same scale as the midterm evaluation. If the student saw patients, their clinical skills in the fundamental areas of genetic counseling noted above will also be rated on a 4-point scale. For all internships, the supervisor will provide a short qualitative assessment of the student strengths/areas of improvement and will document whether the student has met the learning objectives of the internship (pass), met the learning objectives of the internship with reservation (pass with reservation), or did not meet the learning objectives of the internship (did not pass). If the student passed with reservation or did not pass the internship, the supervisor should provide specific information about the student deficiencies. A remediation plan will be determined for the student by the Brandeis University Genetic Counseling Program leadership and will not require additional service from the supervising site. However, the supervisor is welcome to provide feedback as to the most appropriate remediation strategy. The student should e-mail Lauren Lichten a signed digital copy of this document.
COMMUNICATION:
The supervisor and student are encouraged to be in contact with the Associate Director of the M.S. in Genetic Counseling Program with ongoing concerns throughout the internship. In all interactions, extreme care should be taken to protect patient privacy and no identifying patient information should be shared.

GRADING:
In order to obtain course credit for their internships, students must pass their final evaluation(s) without reservation. For BIOL212B and BIOL212C, both 14 day internships must be passed without reservation in order to obtain course credit. If the student passes with reservation or does not pass, the student will receive an incomplete until successful remediation has occurred.