#### **Genomic Medicine IV - Goals**

- Bring together professional societies and organizations involved in setting clinical practice guidelines
- Learn their perspectives on genomic medicine
- Understand their processes for establishing guidelines
- Explore how to facilitate integration of genomic medicine into clinical best practices

## Genomic Medicine IV, Jan 28-29, 2013

Accreditation Council for Graduate Medical Education Accreditation Council for Continuing Medical Education **American Academy of Pediatrics** American College of Cardiology American College of Medical Genetics and Genomics American College of Physicians American Congress of Obstetrics **American Heart Association** American Society of Clinical Oncology **Association of Professors of Human Medical Genetics** 

# Why Only Doctors?



He was different from the other doctors. For one thing, he refused to play God.

#### Baldwin, M. http://www.cartoonstock.com

#### Questions Asked of Professional Societies (in your specialties or among your members...)

- State of science and practice of genetics/genomics
- Short- and long-term pace of change in use of genomics
- Gap in use of genomics across leading academic centers, well-informed specialty practice and small practice MDs
- Any needs assessments
- Whether patient access to high quality care is now or soon will be impaired by lack of MD genomic literacy
- Current plans to address perceived shortfalls in literacy
- Specialty board activity to include genomics in certification
- Process to review literature and fashion guidelines for use of genomics in diagnosis and treatment

## **Areas of General Consensus**

- Present genomics to physicians as gradual evolution rather than "revolution"
- Embed genomics education at point of care with adequate clinical decision support technologies
- Share freely genomics education materials already produced by many societies
- Utlize other educational resources such as checklists, ethical guidelines, case studies
- Incorporate genomics into certifications and licensing, emphasizing appropriate competencies
- Allow subspecialty-tailored training rather than general programs requiring rare syndromes and dysmorphologies

#### Areas of Concern

- Standards for data storage and sharing
- Liability risks from extensive genomic testing
- Conflict in guidelines across societies
- Interpretation and counseling on DTC testing
- Marketing pressures from genetic evaluation companies
- Even physicians confident in their genomics knowledge felt reluctant about ordering and interpreting tests
- Even physicians who think genomics is important were willing to commit only 1-2 hrs to education
- Minority of physicians who thought family histories were important routinely take a complete 3-generation FHx

#### Inter-Society Coordinating Committee For Practitioner Education In Genomics (ISCC)

- Charge: To improve genomic literacy of physicians and other practitioners and enhance the practice of genomic medicine through sharing of educational approaches and joint identification of educational needs.
- **Purpose:** To facilitate interactions among professional societies in increasing the understanding and expertise of practitioners in genomic medicine.
  - Focus primarily on physicians and dentists initially
  - Hope soon to collaborate with allied practitioner groups

#### Inter-Society Coordinating Committee For Practitioner Education In Genomics (cont)

- Relation to professional societies:
  - Recognize primacy of societies/boards in defining practice guidelines and certification requirements
  - Support and stimulate activities of these societies, by offering partnership and available expertise where desired
  - Not intended to assume direction or primacy, nor in any way to supersede societies' role in guiding their memberships

#### Inter-Society Coordinating Committee For Practitioner Education In Genomics (cont)

- Long-term vision: Continued technologic advances will soon make it possible for substantial proportion of patients to have genomic sequence information readily available to support routine clinical decision-making
  - Educational efforts begun now will enable parallel evolution of scientific understand of genomic variation with practitioners' knowledge and competence in applying that understanding.
  - Sufficient numbers of clinically relevant findings now available to support effective educational efforts in use of such variants in clinical care

## Inter-Society Coordinating Committee for Physician Education in Genomics

#### Proposed Structure

- One representative from participating professional societies and one from interested NIH Institutes and Centers appointed to variable terms
- Ad hoc content experts to be invited as needed
- Co-chaired by a professional society representative and an NIH person
- Meet at 6-month intervals with conference calls between meetings
- Design a 3-5 year work plan with potential for additional years if needed

## **Proposed Specific Activities of ISCC**

- Review maturation of genomic sciences from lab to clinic and bedside as an aid in correct clinical use of these data
- Review and disseminate latest findings and reports from authoritative sources
- Commission working groups to provide guidance on trans-professional society issues
- Focus on enhancing physician competencies such as:
  - Utilization of genetic counselors
  - Pre-test counseling and consent
  - Selection of a laboratory
  - Ordering tests and interpreting results
  - Discussions with patients and families
  - Identification and use of physicians expert in genomics

## Proposed Specific Activities of ISCC (cont)

- Review professional society guidance on request
- Identify and disseminate metrics for monitoring success of physician educational programs in leading to appropriate use of genomic technologies
- Provide venue for sharing effective genomic education materials and practices across professional societies
- Collaborate with groups leading education efforts for other health providers
- Assist ACGME and ACCME in programs to support physician education throughout their careers

## **Proposed Initial Working Groups**

#### Competencies

- Review surveys and other sources to see what competencies would fit into current clinical practice
- Review existing competencies and existing guidelines
- Work with societies to determine their desires and needs for competencies

#### **Educational products**

- Collect existing products from ISCC societies
- Identify relevant federally-funded resources
- Identify new advances that may require educational initiatives

## **Proposed Initial Working Groups**

#### **Engagement of Specialty Boards**

- Determine extent specialty boards already have genomics in their certification processes
- Reach out to boards that may not be integrating genomics at present, explore potential needs
- Link boards with relevant professional societies already implementing genomics education

#### **Use Cases**

- Develop general and society-specific use cases
- Create educational materials to support use cases
- Review existing competencies and guidelines

# How to Spell Success?

The ISCC will have been a success if inter-society communications are free-flowing and useful, and if there are documented improvements in appropriate use of genomic strategies by physicians.

Specific process metrics might include:

- Educational best practices identified and disseminated
- Physician competencies generated
- Estimates of physician use
- Professional society guidelines documents reviewed and improved
- Interactions with other relevant efforts and other provider group educational activities

## How to Spell Success (cont)?

More substantive metrics might include:

- Educational products are positively assessed and increasingly used by practicing physicians
- Surveys by professional society members reveal improved knowledge and comfort in using genomics in their practices
- Useful papers are published by the Coordinating Committee and the commissioned Working Groups
- ACGME and ACCME report improved educational efforts in resident training and in practicing physicians as measured by improved practice of genomics-based medicine

## ISCC – May 29, 2013

Accreditation Council for Graduate Medical Education Accreditation Council for Continuing Medical Education American Academy of Family Practice American Academy of Pediatrics American Board of Medical Specialties American College of Cardiology American College of Medical Genetics and Genomics American College of Physicians **American Congress of Obstetrics American Heart Association** American Society of Clinical Oncology American Thoracic Society Association of Molecular Pathologists Association of Professors of Human Medical Genetics **College of American Pathologists** Your Professional Society here