

SESSION IV: JOINT ACADEMY/PROFESSIONAL SOCIETY APPROACH TO GENETICS EDUCATION

IOM Roundtable
Improving Genetics Education in Graduate and
Continuing Health Professional Education: A Workshop
August 18th 2014

Presented by: Michael F. Murray, MD

Co-chair, ISCC

Director of Clinical Genomics Genomic Medicine Institute Geisinger Health System



What is this????

Applying Genomic Sequencing Data in Patient Care



Formed in February 2013 (from the NHGRI's Genomic Medicine IV meeting)

ACP'S SURVEY OF INTERNISTS

- Web survey was sent to 806 participants from ACP's Internal Medicine Research Panel who met the following criteria:
 - **►** U.S. Internist
 - Actively working in medicine
 - Spending some/all professional time in direct patient care
- 486 Internists responded to the survey (60% response rate)

Respondent Demographics

Age:

Resident/Fellow
Under 40:
40 to 55:
Over 55:

Work Setting:

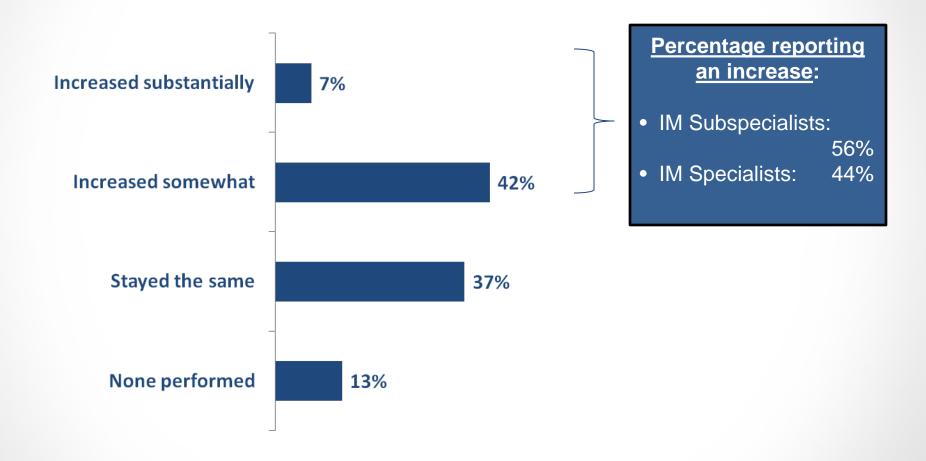
Private office: 42%
Hospital: 25%
AMC: 23%
Other: 11%

Specialty:

IM Specialist: 60%IM Subspecialist: 40%

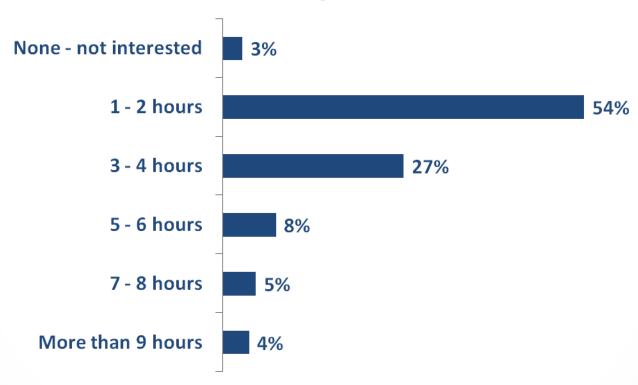
Survey conducted Fall 2012

Changes in volume of genetic testing over the prior two years [2011-2012]



The overwhelming majority of Internists are willing to devote time to Genomics Education

Time Willing to Devote



- Formed in February 2013 (from the NHGRI's Genomic Medicine IV meeting)
- The group facilitates interactions among medical professional societies and the NIH Institutes & Centers to exchange practices and resources in genomic education and clinical care.

GOALS and AIMS

- •Promote the sharing of educational approaches and the joint identification of educational needs in order to improve genomic literacy and to enhance the practice of genomic medicine.
- •Jointly identify the needs of professional societies and clinicians in filling in gaps in evidence and knowledge and in providing effective educational efforts.
- •ISCC offers partnership and available expertise to these societies to guide development of educational initiatives.



The growing role of professional societies in educating clinicians in genomics

Teri A. Manolio, MD, PhD¹ and Michael F. Murray, MD²; for the Inter-Society Coordinating Committee for Practitioner Education in Genomics

MEMBERS

Accreditation Council for Continuing Medical Education (ACCME)

Accreditation Council for Graduate Medical Education (ACGME)

American Academy of Family Physicians (AAFP)

American Academy of Ophthalmology (AAO)

American Academy of Pediatrics (AAP)

American Association for Clinical Chemistry (AACC)

American Board of Medical Genetics (ABMG)

American Board of Medical Specialties (ABMS)

American Board of Ophthalmology (AAO)

American College of Cardiology (ACC)

American College of Medical Genetics and Genomics (ACMG)

American College of Physicians (ACP)

American Congress of Obstetricians and Gynecologists (ACOG)

American Dental Association (ADA)

American Dental Education Association (ADEA)

American Heart Association (AHA)

American Medical Association (AMA)

American Society of Human Genetics (ASHG)

American Society of Clinical Oncology (ASCO)

American Thoracic Society (ATS)

Association for Molecular Pathology (AMP)

Association of Professors of Human and Medical Genetics (APHMG)

Centers for Medicare and Medicaid Services (CMS)

College of American Pathologists (CAP)

Council of Medical Specialty Societies (CMSS)

Health Resources and Services Administration (HRSA)

International Association for Dental Research (IADR)

International Society of Psychiatric Genetics (ISPG)

National Center for Biotechnology Information (NCBI)

National Cancer Institute (NCI)

National Eye Institute (NEI)

National Heart, Lung, and Blood Institute (NHLBI)

National Human Genome Research Institute (NHGRI)

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

National Institute of Allergy and Infectious Diseases (NIAID)

National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS)

National Institute of Child Health and Human Development (NICHD)

National Institute on Drug Abuse (NIDA)

National Institute on Deafness and Other Communication Disorders (NIDCD)

National Institute of Dental and Craniofacial Research (NIDCR)

National Institute of General Medical Sciences (NIGMS)

National Institute of Mental Health (NIMH)

National Institute of Neurological Disorders and Stroke (NINDS)

National Library of Medicine (NLM)

Society of General Internal Medicine (SGIM)

FOUR WORKGROUPS

Competencies (Bruce Korf, Chair)

- •Review surveys and other sources to see what competencies would fit into current clinical practice.
- •Review any existing competencies in genomic medicine education and existing guidelines in the use of genomics.
- •Work with individual professional societies to determine their desire for competencies and where they would fit in.

FOUR WORKGROUPS

Educational Products (Robert Roberts, Chair)

- Collect existing educational products from ISCC representatives.
- Identify relevant federally-funded resources and initiatives (such as CRVR, PharmGKB, Genetic Testing Registry) that could assist genomics education efforts and clinical practice.
- Work with use cases group to identify areas of emphasis for educational products (e.g. ordering of genetic tests, counseling, return of results).
- Identify new advances that may require educational initiatives.

FOUR WORKGROUPS

Engagement of Specialty Boards (Nancy Rose, Chair)

- •Determine the extent that specialty boards already have genomics in their examinations.
- •Reach out to specialty boards that may not be integrating genomics into exams at this time.
- •Link specialty boards with relevant professional societies that are already implementing genomics education or are looking to implement.

FOUR WORKGROUPS

Use Cases (Mark Williams, Chair)

- •Collect existing use cases and disseminate through ISCC dissemination efforts.
- •Develop general and society-specific use cases in genetics in five general topic areas: Pharmacogenomics, Family History, Rare, single gene disorders, Common Disease with genetic component, Whole Genome/Exome sequencing (Incidental Findings).
- Coordinate with the Educational Products WG to identify and develop materials to support use cases
- •Coordinate with the Competencies WG to review existing competencies and explore how to translate into use cases that support competency achievement.
- •Engage with the specialty end users to:Identify subjects of interest for use case development.
- Evaluate disseminated use cases for relevance and utility.

COMPETENCES AND MAPPING COMPETENCIES

SPECIAL ARTICLE

Genetics in Medicine

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Framework for development of physician competencies in genomic medicine: report of the Competencies Working Group of the Inter-Society Coordinating Committee for Physician Education in Genomics

Bruce R. Korf, MD, PhD¹, Anna B. Berry, MD^{2,3}, Melvin Limson, PhD⁴, Ali J. Marian, MD⁵, Michael F. Murray, MD⁶, P. Pearl O'Rourke, MD⁷, Eugene R. Passamani, MD⁸, Mary V. Relling, PharmD⁹, John Tooker, MD, MBA¹⁰, Gregory J. Tsongalis, PhD^{11,12} and Laura L. Rodriguez, PhD⁸

COMPETENCES AND MAPPING COMPETENCIES

ENTRUSTABLE PROFESSIONAL ACTIVITIES (EPA)

How Do EPAs Differ From Competencies?

EPAs are not an alternative for competencies, but a means to translate competencies into clinical practice.

Competencies are descriptors of physicians, EPAs are descriptors of work.

EPAs usually require multiple competencies in an integrative, holistic nature.

ISCC Competencies Working Group – EPAs (Entrustable Professional Activities)

- 1. Family History EPA: Elicit, document, and act on relevant family history pertinent to the patient's clinical status
- 2. Genomic Testing EPA: Use genomic testing appropriately to guide patient management
- 3. Patient Treatment Based on Genomic Results EPA: Use genomic information to make treatment decisions
- 4. Somatic Genomics EPA: Use genomic information to guide the diagnosis and management of cancer and other disorders involving somatic genetic changes
- 5. Microbial Genomic Information EPA: Use genomic tests that identify microbial contributors to human health and disease, as well as genomic tests that guide therapeutics in infectious diseases





Project Funding

From 2008-2009, with funding from the National Human Genome Research Institute, the University of Virginia created the web-based architecture for G2C2.

NHGRI funded d'Vinci Interactive in 2010 - 2014 for continued modification, expansion, and development of the G2C2 education repository



- The mission of G2C2 is to provide high quality educational resources for group instruction or self-directed learning in genetics/genomics by health care educators and practitioners.
- The G2C2 solicits, reviews and organizes resources through an interdisciplinary collaborative exchange.
- Responsive to a strong interest in having a centralized web resource for educators that could facilitate communication, development, and dissemination of educational resources and approaches to achieve genetic/genomic competency.
- The Genetics/Genomics Competency Center is:
 - Created to provide healthcare professionals with a learning management system
 - Based on a core set of competencies that organizes genetic/genomic educational materials
 - Streamlined to facilitate standardized curriculum development, and
 - Designed to enhance efforts to develop trans-disciplinary approaches to genetics/genomics education



View the **Competencies Guidelines** for these disciplines:

- **Genetic Counselors**
- Nurses (Competencies to which resources are currently mapped)
- Nurses Essential Genetic and Genomic Competencies for Nurses with Graduate Degrees (document provided for your information–resources not yet mapped to these competencies)
- **Pharmacists**
- Physician: Framework for Physician Competencies
- ISCC Competencies (coded for resource mapping)
- Physician: ACMG Competencies
- Physician: ISCC Membership
- Physician Assistants







Home About the Project Meet the Experts Curriculum Map / Guidelines Feedback Help

Map & Guidelines Curriculum Map Physician 1: FAMILY HISTORY 2: GENOMIC TESTING 3: PATIENT TREATMENT BASED ON GENOMIC RESULTS 4: SOMATIC GENOMICS 5: MICROBIAL GENOMIC INFORMATION Project Funding | Support National Human Genome This project is funded by the Research Institute

Version 2.1.4





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« Map & Guidelines

Curriculum Map

Physician

1: FAMILY HISTORY

- + P-FH1A: Patient Care
- P-FH1B: Knowledge for Practice
- P-FH1C: Practice-Based Learning and Improvement
- P-FH1D: Interpersonal and Communication Skills
- P-FH1E: Professionalism
- P-FH1F: Systems-Based Practice
- P-FH1G: Interprofessional Collaboration
- P-FH1H: Personal and Professional Development
- 2: GENOMIC TESTING
- 3: PATIENT TREATMENT BASED ON GENOMIC RESULTS
- 4: SOMATIC GENOMICS
- 5: MICROBIAL GENOMIC INFORMATION

GEISINGER

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Find a Doctor | Find a Clinic

Patients

Tools, Events and Information for Geisinger Patients

Professionals

Employment, Medical Education and Patient Referrals

Research

Research & Clinical Trials, Innovations and Discoveries

Request an Appointment

Make a Referral

Genomic Sequencing Study Overview



Geisinger Health System is partnering with Regeneron, a leading biopharmaceutical company, for a new, long-term, large research study.

Significance of Genomic Research

Genetic research holds great promise to increase understanding of the causes of diseases, disorders, and medical conditions - including conditions that today have limited or no treatments available. By comparing genetic information against medical histories, Geisinger and Regeneron hope to eventually develop new means of diagnosing, preventing, and/or treating medical conditions - before they cause significant harm. Some participants may also receive information that could be useful in their own medical care.

This study is aligned with Geisinger's focus on innovative research to help patients in our communities - as well as improve healthcare for patients across the nation and worldwide.

Overview

For Patients

For Healthcare Providers

News

Resources

Genomic Sequencing Study
Overview Brochure
Contact Us
Geisinger Research Consent Form
Research Leader Commentary

CLINICIAN GENOMICS EDUCATION

- Harvard CME [2005-2010]
- Medseq [2012-2013]
- Geisinger [2014-]

WHAT DOES THE PROVIDER NEED TO KNOW??





Harvard Medical School
Department of Continuing Education

2.5 day CME

Broad overview

 No immediate application

6.0 hour CME

- •Targeted to the task of delivering "General Genome Reports"
- •Application in 5-10 cases over 6-12 months
- •"Live" resource center

< 1.0 hour CME

 Targeted to a specific result

- Immediate application in one case
- Consultative assistance (formal and curbside)

Thanks to all of my colleagues and collaborators.

Thank You for your attention.