



# Association for Clinical Cytogenetics

<http://www.cytogenetics.org.uk>

**ACC Council Meeting  
British Society of Hematology, 100 White Lion Road, London  
Tuesday 1 December 2009**

Kim Smith (KS)	Chair
Amanda Dixon-M <sup>c</sup> Iver (ADM)	Treasurer
Teresa Davies (TD)	Secretary
Katie Waters (KW)	Assistant Secretary

Sandra Birdsall (SB)	Ordinary member	Val Davison (VD)	Trustee
Nick Bown (NB)	Ordinary member	Rod Howell (RH)	Trustee
Hazel Harvey-Smith (HHS)	Ordinary member	Gordon Lowther (GL)	Chair, ETC (invited)
Christine Waterman	Ordinary member		
Anne Reilly (AR)	Genetic Technologist member		
Ros Allen	Genetic Technologist member		
Ian Cook (IC)	Junior member		
Phillippa May (PM)	Junior member		

## **Council Pre-meeting**

### **1 Committees and succession planning ACC Council**

Chair raised that a number of experienced senior members of the profession would be retiring in next 12 months with others to follow. This will leave vacant ACC posts that need to be filled.

It was noted that ACC and CMGS could be a single professional genetics group in the future. Currently the two organisations are working together - Executive attendance at respective meetings has been agreed (Sian Ellard will attend this meeting, Steve Williams has already attended equivalent CMGS meeting).

Turnover of council members was discussed. Chair will finish her term at the 2010 AGM. HHS and TD will also be standing down at AGM. There is currently one vacant ordinary member. The ACC will need a new chair who will be nominated by elected Council members. It was agreed that the Chair would be nominated at the March Council meeting. It was also suggested that there could be appointment of a vice chair. It was recognised that senior experienced members of the profession should be encouraged to stand. PM is standing down as a Junior member at AGM. Changes to Junior member representation were discussed and it was agreed that the number of junior member would be reduced from up to five to up to three and these positions would be reallocated to the ordinary member group to help increase the number of senior individuals standing on Council and consequently support succession planning. This will require a rule change and ratification by the membership at next AGM before the number of ordinary members can be increased. AR is standing down as Genetic Technologist representative at AGM. John Crolla has completed his term as a Trustee and Rod Howell steps down at AGM. Trustees are nominated and selected by Council. Post of President is vacant.

Elections 2010 will be for:

Secretary

Three ordinary members

One junior member

One Genetic technologist representative

Newly elected members will be invited to March meeting as observers.

Trustees: Kim Smith was nominated as a Trustee on completion of her role as Chair. Names were suggested to approach to be the second.

Teresa Davies was nominated and accepted the role of ACC President.

**Action: Secretary to organise elections.**

**Secretary to prepare rule change for ratification at AGM.**

**Other committees requiring ACC representation:**

**RCPATH Genetics SAC.** One representative (with FRCPath) for Lorraine Gaunt who has completed her term.

**NQAAP in Clinical Cytogenetics and Molecular Genetics.** Two representatives (Heads of Departments) to replace Val Davison who has completed her term and Jonathan Waters who has stepped down to take on Chair of RCPATH Genetics SAC.

**Best Practice.** Chair (Lorraine Gaunt) and alternate (Jonathan Waters) have stepped down to take on other roles. It was agreed that leads for constitutional and oncology Best Practice guidelines would be appointed.

**Bioinformatics Committee (joint ACC and CMGS).** This is a new committee with remit to take a strategic position on the bioinformatics needs of the profession in the future. Members to be approached for the above roles was discussed and agreed.

**Action: Chair to take suggestions forward.**

**Professional roles:**

**CPA assessors.** VD has submitted her resignation as an assessor to CPA and will step down next year. It was noted that the number of assessors in cytogenetics needs to be increased. If the group were expanded beyond Consultant clinical scientists to include senior scientists on band 8 then this would be equivalent to the situation in Pathology disciplines where a senior BMS and Consultant undertake assessments together.

**Action: Secretary to write letter to CPA with this suggestion.**

**ACS assessors.** One person immediately to replace Jeff Williams who will be retiring. Other assessors will be required in the medium term.

**Action: Chair to email via heads of Departments inviting expressions of interest.**

## **Council Main Meeting**

### **1 Apologies for Absence and welcome to new members and invited attendees**

Apologies were received from Chris Kettle (Junior member), Steven Williams (Ordinary member). Sian Ellard was attending on behalf of CMGS executive. Helen White was attending on behalf of NGRL for item 10.

### **2 Minutes of the meeting held on Tuesday 4 June 2009**

These were accepted with minor amendments.

### **3 Chairs Report**

#### **1. Joint ACC and CMGS Executive Committee Meeting**

Kim Smith, Teresa Davies, Katie Waters, Amanda Dixon-McIver from ACC and Graham Taylor, David Baty, Sian Ellard, Sarah Warburton, Simon Ramsden from CMGS met on 12 June to discuss current and future operation of the two professional bodies, considering areas of common interest and overlap. Topics included membership, representation, profile, websites, conferences, scientific developments, new technologies, bioinformatics, quality issues & funding.

Agreed actions included:

- Continue with joint representation to external bodies and consultations etc.
- Cross representation on ACC Council and CMGS Executive Committee with sharing of papers and minutes.
- Add links on each website to the other website. Explore possible common front page with links to each website.
- Establish a joint bioinformatics working group.
- Promote the professional bodies to ensure appropriate inclusion, by DH and other external bodies, in any consultation/project relevant to NHS genetics laboratories.
- Investigate publishing Best Practice Guidelines
- Identify a mechanism for the new genetics trainees to register with both professional bodies.

#### **2. Diagnostic Array CGH**

a) NGRL (Wessex) organised a meeting on 8 July. Presenters from UK and non UK laboratories discussed the use of array CGH and commissioning models were presented to a wide audience spanning laboratories, public health & commissioning.

b) UKGTN invited UK commissioners to a meeting on 11 November to hear about current service experience and costs. This meeting was aimed at educating commissioners to enable more informed and equitable funding of array CGH across the UK. UKGTN will liaise with DH to identify appropriate process for taking this forward and with the SHAs to ensure this is on their agendas. Talks have been circulated and notes from the meeting will be distributed to HoDs when available.

### 3. UKGTN

a) Val Davison has been appointed as interim Cytogenetics UKGTN advisor.  
b) UKGTN Steering group had agreed that cytogenetic laboratories that are part of an NHS regional genetic centre can apply for UKGTN membership without completing gene dossiers for their commonly offered repertoire of tests (cancer/haematological tests are excluded). The project team are finalising the implementation of the process.

**Action: Chair to circulate list of tests to Council for final comments.**

c) Following on from the review of Pathology, a Diagnostics Programme Board has been established at DH, NICE will establish a 'diagnostics' arm & Academy of Medical Colleges will establish a project on quality and accreditation.  
d) It was noted that the new Medical Genetics Definition set encompassed mainstreaming of genetics as the document recognised other disciplines directly referring lab tests outwith of specialist commissioning.  
e) UKGTN have revised their remit to include 'Any test for NHS service provision by a UKGTN member laboratory which will require funding by specialised commissioning arrangements as defined by the national definition set for medical genetics services'.  
f) Workload currencies continue to be piloted by Molecular Genetics (they do not anticipate formal implementation in April 2010). Cytogenetic workload/currency data pilot is ongoing. It was noted that not all HoDs who agreed to provide data have done so.

**Action: KW to contact HoDs and request data.**

### 4. Joint Committee on Medical Genetics

Documents previously circulated for information.

a) DH has been invited to respond to House of Lords report on Genomic Medicine – all other committees have been invited to submit comments to DH.  
b) Work underway to develop knowledge based assessment and recognised outcome measure / qualification for medical higher specialist trainees (equivalent to FRCPath Part 1 written). Ian Frayling is advocating extending to full FRCPath to give more opportunities for creation of Genetic Pathologist positions.  
c) Review of Consent & Confidentiality guidelines is underway.  
d) JCMG will respond to HGC consultative document on 'Direct to consumer testing'.

### 5. NGRL Steering group

a) Ideas requested for improving two-way communication between NGRLs and diagnostic labs. A representative from NGRLs will attend ACC Council and CMGS Executive meeting to discuss issue. Helen White (Wessex) invited to attend this meeting. NGRLs offered a "meet & greet" facility at 2010 ACC Spring Conference to support interaction.  
b) A review paper of Next Generation Sequencing produced by Chris Mattocks has been circulated to all HoDs for information and comments – NGRL hope to publish final version in BSHG newsletter. Important to consider pathology wide implications for NGS. BRC Manchester & NGRLM have submitted NIHR bid for evaluating bioinformatic aspects of NGS.  
c) DH meeting with Regulators on 16 Dec to obtain guidance on legal aspects of using kits labelled "for research use".  
d) NGRLs intend to hold a stakeholder meeting in January 2010 to discuss what they could contribute in the next funding period (and help form their funding bid).

### 6. Bioinformatics Strategic Planning Group

At the joint meetings of ACC and CMGS execs, it was agreed to establish a joint group to look at future service bioinformatic needs and strategic planning/training issues. Proposals for membership were discussed under pre-meet agenda.

### 7. NLMC (National Laboratory Medicine Catalogue) Stakeholder Group

We have been invited to send an ACC representative (Kate Martin). First meeting 2 December 2009.

### 8. Conference

Oxford will host the ACC & CMGS Spring Conferences in April 2010. ACC 12 - 13 April with a joint day on Wednesday 14 April. Call for abstracts has been circulated to HoDs.

## 4 Education & Training Committee

Report circulated and presented by GL.

### 1. Modernising Science Careers

Outcome of consultation due to be published by the end of the year, together with an English policy document on MSC.

### Genetics Pilot

Twelve Practitioner Training Programme and 12 Scientific Training Programme students, funded by the national project commenced training in October. The University of Nottingham is the HEI partner, and

they have already provided the first introductory courses for the trainees. There will be courses at the start of each of the clinical modules (2-4 days in length) supplemented with problem based and e-learning. Work is ongoing on assessment and amongst the other professions to develop their curricula.

**Action: Chair asked VD to provide a summary/update on MSC pilot for HoDs.**

## **2. Current Training Scheme**

The first training course took place 23 -27 November and was attended by 12 trainees. The second course is scheduled for June 2010.

## **3. Scientist recruitment 2010**

VD reported that a SHA decision is awaited as to whether MSC training programme will be commissioned for 2010 intake.

ADM raised concerns over loss of training funds and the implications this would have for ACC.

## **4. Responses on behalf of ACC**

### **RCPATH Proposal for a combined Healthcare Science workforce database.**

Supportive response sent (Oct 2009) making the following points.

- Support the principle and would be interested in participating.
- Would want the database to be truly inclusive (covering all staff working in Healthcare science – not just Clinical Scientists)
- Would wish information supplied by the ACC to be separately identifiable and would wish to retain the ability to analyse ACC data and retain ACC representation at DH Workforce Planning.

### **Consultation on the new Science Diploma**

GL responded to an invitation to attend a discussion regarding the establishment of this new diploma for 14 to 19yr olds. Lucy Jenkins (Molecular, Great Ormond Street) was also present. GL fed in the importance of teaching genetics as a core component of this qualification.

## **5 Professional Standards Committee**

Report previously circulated by Lorraine Gaunt and presented by KS.

The 'new style' PSC consisted of Lorraine Gaunt and Jonathan Waters. They have completed their terms of office and have both accepted different professional responsibilities. PSC operated without a formal committee, recruiting colleagues as required and for the skills they could offer and for specific tasks only. This has worked to a greater extent. Heads of Departments (and by implication their staff also) were asked what they required to help direct PSC.

PSC achievements were:

- Introduction of a system of document control, coupled with a specific format to achieve a unifying identity.
- Introduction of a system of 2 yearly review of BPG.
- Introduction of a system of withdrawing documents which are 4 years old or more and are out of date, even if no replacement is available.
- Introduction of a system of BPG archive, and access to those withdrawn documents via the website.
- Introduction of a system of 'change requests' and discussion via the website this is open to all. Colleagues were commissioned to lead with BPG topics (for details see the newsletters on the PSC page on the web). In brief these were:

- 'QF-PCR for the diagnosis of aneuploidy' guidelines Version 2 (and subsequently v2.01) was published. This is the first shared ACC/CMGS document and provides unified advice to both professional groups, and carries both the ACC and CMGS logos.
- BPG for arrays was published.
- New proposed CLL TP53 (draft 1) guidelines have been sent to HoDs for comment.
- Draft 1 of FISH in haemato-oncology has been sent to HoDs for comment.
- Separate amniotic fluid and CVs guidelines were withdrawn and replaced with a single document 'prenatal guidelines'.
- New solid tissue guidelines compiled.
- Comprehensive audit data available on website.

For the future, more oncology BP guidelines and managing to persuade laboratories to maintain a momentum with collection of audit data as national data only works if all units contribute.

LG wished to thank colleagues and HoDs who gave their time and energy and support.

With specific thanks to: Jonathan Waters, Gavin Cuthbert, John Emslie, Edna Maltby, Lisa Burvill Holmes, Fiona Ross, Carol English, Annette Cockwell, Sue Hamilton, Kathy Mann (and many others too).

Council thanked the committee and others involved for their contributions.

## **6 Membership Liaison Committee**

Report circulated and presented by PM.

**1. Current committee members**

Philippa May (PM) chair, Ian Cook (IC) secretary, Simon McCullough (SMc) ETC representative, Mandeep Bahra (MB) Conference Liaison 2010.

**2. Genetic Technologists - Membership Profile**

PM circulated the results of the membership profile at the end of July, 42 out of 238 are members of the ACC representing only 17%. However, it was noted that Michelle Fenlon (Birmingham) is conducting a similar survey. She is asking more in-depth questions, such as how many GTs are *eligible* to register with the VRC, so will provide additional information.

**3. Spring Conference**

MLC has invited Mark Potter of the HPC to speak at the Spring Meeting. He has agreed to give a presentation about the recent HPC CPD audits. This will be on the joint day so as to reach molecular geneticists and cytogeneticists together.

**4. HPC CPD audit**

HPC have agreed that examples of successful CPD audit portfolios can be placed on the ACC website, to show other Clinical Scientists what is expected of their CPD portfolios and provide inspiration for their own CPD record keeping. PM has approached five Clinical Scientists who were audited, two of whom have so far agreed. There will be a comment stating that the portfolios are not endorsed by the HPC and are therefore not necessarily the gold standard, simply that they passed.

PM has also agreed with the HPC to produce a sample CPD profile for the HPC website. As this profile is produced in conjunction with the HPC and is endorsed by them, it is a more lengthy process requiring drafting and reviewing by Council members so it may take some time.

Chair thanked MLC for undertaking this useful piece of work.

**5. Website**

As agreed at the last Council meeting, the website has been updated to reflect the new structure of the MLC. MLC produced a flyer in June encouraging members to visit the ACC website, and in particular highlighting the new example HPC Registration portfolio which many pre-Registration scientists were unaware of.

**6. Structure of MLC**

PM finishes her term next year, at which point the MLC will consist of IC (elected to Council) and SMC (invited as ETC rep) and MB (invited as conference liaison). MLC would like to encourage new people to get a taste of what Council is about. MLC are producing a job specification to circulate to look for volunteers to join the MLC for a set term. The aim is to have an informal and friendly approach, to encourage anyone who is interested to step forward.

**7 Genetic Technologists**

Report circulated and presented by AR.

1. Beverley Royston (vice chair AGTC) has resigned. She was due to take over the Chair of the AGTC in November 2009. AGTC have asked AR to take over the position and she is currently considering it.

2. Numbers of registered GTs was reviewed following a suggestion from the VRC that there might be geographical "hot spots" of low registration. The main areas lacking appeared to be the Scottish and London laboratories, staff in these areas need to be targeted and encouraged to register.

3. Increasing professional membership was discussed and ideas to try and boost membership were discussed.

4. VRC has received applications from GT's whose experience crosses both cytogenetics and molecular genetics.

5. VRC will be auditing GT's CPD from October 2010, guidance notes are to be discussed at the next VRC meeting and will be uploaded on to the VRC website soon. The AGTC will use the same information when available.

6. HPC application was discussed. Katie Waters has agreed to work with Anne Reilly on the application. KW raised concerns regarding the low number of eligible GTs who were VCR registered.

7. AGTC will follow the ACC and reduce the number of meetings to three a year.

**Action: AGTC should update website and promote the benefits of registration.**

**HoDs should encourage GTs to join professional body and obtain registration.**

**8 Treasurer's Report**

**1. Financial procedures and controls**

ADM prepared ACC document entitled 'Summary of financial procedures and controls'. This was accepted by Council. All ACC cheque payments or withdrawals from bank account need to be signed by treasurer and one named signatory. Council agreed to this arrangement and to three council members

as signatories (TD, KS, KW).

**Action: Signatories to complete mandate form following this meeting.**

### **2. Speakers expenses.**

ADM had prepared a document 'Information for invited speakers' for comments. Amendments are to be made including that expenses will follow guidance as given in Agenda for Change: NHS Terms and Conditions of Service Handbook.

**Action: ADM**

### **3. FHCS**

ADM has notified FHCS that ACC will withdraw as member.

### **4. Funding of joint ACC/CMGS study days**

ADM suggested moving away from current standardised fee for events to an event specific cost. This would be a compromise acceptable to CMGS and should mean that event costs are covered.

**Council accepted this suggestion in principle.**

ADM and Sian Ellard raised that obtaining payments from members could be a problem if payment was not provided directly but by their employer.

### **5. BSHG joint ACC/CMGS membership**

To accommodate MSC scientists there will be a revised BSHG application form with a new box which can be ticked for joint membership. The fees for these individuals will be split between the two professional bodies.

## **9**

### **Scientific and Governance items**

#### **1. Non-Invasive Prenatal Diagnosis (NIPD)**

Helen White provided an update on NIPD project RAPID (reliable, accurate prenatal invasive diagnosis). Funding started June 2009 and scientific staff have now been appointed. Wessex will be working on non-invasive prenatal diagnosis for Down Syndrome, Manchester on free fetal DNA testing (gene dossier will be submitted to UKGTN) and GOSH on haemoglobinopathy/sexing markers.

A meeting to disseminate information to laboratories has been arranged for 19 January 2010.

#### **2. ACC Leukaemia Working Party / UKCCG Steering Committee meeting 10 November 2009**

Report presented by NB.

Meeting attended by Christine Harrison (CH), Helena Kempinski, Mike Griffiths, Polly Talley, Mark Pomfret, Fiona Ross, Debbie Lillington, Norman Pratt, Nick Telford, Nick Bown (apologies from John Swansbury, Mervyn Humphries)

Items discussed:

**Leukaemia Research Cytogenetics Group:** now re-located to Newcastle. CH gave an update on the activities of the unit. Recruitment has gone well, and links with local research groups are flourishing. Ongoing projects include novel IgH partners, Ikaros deletions, iAMP21 and data analysis relating to trials ALL97 and UKALLXII.

**UKCCG meeting, Newcastle, 16-17 March 2010.** For the first time, a two-day meeting is planned.

Proposals for speakers were discussed.

#### **Raising the profile of oncology genetics.**

Oncology genetics now comprises up to 40% of the workload of many non-specialised/regional cytogenetics laboratories. As molecular genetic testing will become increasingly important in haematology and in adult solid tumours: there is a need to encourage and develop CMGS involvement in oncology genetics.

The LWP perceives a lack of cohesive input into strategic planning in regard to provision of specialised oncology genetic testing and suggested that a united group of ACC/CMGS practitioners involved in this work area could have a powerful influence at the RCPATH and DH levels.

The LWP and UKCCG Steering Group propose the creation of a new special interest subgroup for oncology genetics within the BSHG: such a group would not only bring together members of the ACC and CMGS practicing oncology genetics, but could also attract interest, input and membership (of the BSHG) from other geneticists, pathologists, haematologists, and scientists based in other (non-genetic) laboratories. The LWP will prepare a brief discussion paper, and then seek support from the ACC, CMGS, other leading individuals in oncology genetics, and the BSHG.

#### **3. CGS Guidelines for testing in children**

CW will review/contribute to the new draft CGS Guidelines for testing in children on behalf of ACC.

## **10**

### **Networks & European Issues**

#### **1. NGRL. Helen White (HW) (invited representative from NGRL Wessex).**

Channels of communications into the NGRLs were discussed with emphasis on improving two way

communications. HW explained that the reference laboratories were funded for major projects and were working to capacity. Chair asked if the laboratories would be able to take on small additional projects. HW responded that a request would have to go via the Steering Group for consideration. It was discussed how ACC can feed into the work of the reference laboratories. In January 2010 there will be a stakeholders meeting where support will be important to secure an extension of the reference laboratories funding. Ways of increasing the awareness of the reference laboratories activities was discussed and the opportunity for more proactive consultation via the website was suggested. A stand at ACC/CMGS Spring conference was seen as a positive step. HW reported that NGRL scientists were very willing to be invited to centres to provide updates on specific projects. Council agreed that a representative should be invited to a minimum of one meeting per year.

**11 Report back from external meetings**

**1. BSHG**

ADM reported back from the minutes of the previous meeting held on 31 August 2009. The financial position of BSHG is weak and action is being taken to address the situation. A review of the constitution will be undertaken.

**2. FASP**

HHS attended the last meeting and reported that thanks were given to ACC regarding help with collection of data for Down Syndrome register. Next meeting is 2 December 2009 where the outcome of the false positive Down Syndrome survey will be presented.

**3. ACS**

Meeting postponed until early 2010.

**12 Correspondence / Applications for Membership**

Nine applications have been received and approved (six from GTs, two from trainees and one overseas). It was noted that 21/23 cytogeneticists and 11/12 molecular geneticists passed RCPATH part I in 2009. ACC had been contacted by a consultant haematologist at Hammersmith Hospital who wished to approach cytogenetics laboratories directly for details of patients newly diagnosed with CML to support a CML registry. It was noted that this information is generally provided by haematologists. It was agreed that ACC would take no action pending receipt of a formal proposal.

**Action: SB to write to clinician.**

**13 Matters arising from previous meeting**

None outstanding.

**14 Any Other Business**

GL reported that at recent Chief Scientific Officer conference that Val Davison had been awarded the HCS Leadership award for her work on MSC project and Rob Elles was awarded the Delivering Quality award for his work quality systems.

**15 Date and venue for next meetings**

Tuesday 2 March 2010. Start time 11.15. Lunch will be provided.

Venue: Agreed to continue with present venue for 2010.

British Society of Haematology, 100 White Lion Street, London N1 9PF.

Following meetings first Tuesday in July and December.

**Action: KW to book venue and confirm dates.**

**Post meeting note.**

**Dates for 2010 Tuesday 2 March, 1 June, 2 November. At British Society of Haematology**

The meeting closed at 15.45.