

# Minutes of ACC Annual General Meeting

12<sup>th</sup> April 2010  
Keble College, Oxford

Chair: Kim Smith  
Secretary: Teresa Davies  
Treasurer: Amanda Dixon-McIver

## 1. Apologies for absence

None received.

## 2. Minutes of previous AGM held on Monday 27 April 2009

Approved. Minutes are available on ACC website.

## 3. Chair's Report

Chair's report was circulated prior to the meeting together with MLC, ETC, AGTC and Professional standards reports. These have been included in the minutes but were not presented in detail at the meeting.

During 2009 and 2010, there have been changes and developments arising from the strong role genetics plays in diagnostic medicine and an increasing overlap, spanning technology, training and service, of cytogenetics and molecular genetics.

- **ACC & CMGS**

The executive committees of both professional bodies met in June and February to discuss areas of common interest and overlap. Both professional bodies recognise that external bodies (such as Department of Health) consider our disciplines together as laboratory genetics and recent technology changes and national initiatives (such as MSC) have moved the specialist disciplines into closer collaboration over service delivery and training.

ACC & CMGS have agreed to continue working closely, providing joint responses to NHS & government related committees. In recognition of the technological changes to diagnostics and service, a joint Bioinformatics Committee has been established to review bioinformatic needs and propose strategies to ensure NHS working practices can evolve alongside the technology. Also, in recognition of MSC training in genetics, both professional bodies have agreed to disband their respective training committees and form a single training committee. Recognising the convergence of NHS cytogenetics and molecular genetics, both professional bodies have consulted with their members over whether work should be started to investigate merging of the ACC and CMGS. ACC members supported pursuing this (107 of 114 responses) and CMGS members also responded positively. The two Executives will now explore both the practicalities (legal, financial and organisational) of merging. The issues will be presented to all members in the future for consideration and for a ballot on whether the ACC and CMGS should merge.

- **UKGTN**

Cytogenetic laboratories that are part of a NHS regional genetic service have been invited to join UKGTN. ACC has submitted an agreed repertoire of investigations considered as a core service and all invited laboratories have now applied for membership against this repertoire. To date, UKGTN recognises constitutional genetic disease and consequently excludes acquired disease. Also array CGH has been recognised by UKGTN via the gene dossier process rather than the core service list. UKGTN is consulted on a wide range of service and commissioning matters and therefore cytogenetic laboratory membership will be mutually beneficial to both Cytogenetics and UKGTN.

- **Specialised Services National Definitions Set no.20 Medical Genetics Services**

This was updated in 2009 and now differentiates between referrals from clinical genetics (as a specialist commissioned service) and referrals from other disciplines as mainstream medicine. ACC and UKGTN responded to the consultation on the drafting of this document.

- **Genetics and Mainstream Medicine**

Document was published earlier in 2010. This review was commissioned by UKGTN and makes recommendations for genetics to be embedded into mainstream medicine disciplines to allow the NHS to fully benefit from the advances in genomics. Two other key strategic reports were also published in 2009/2010 – the House of Lords Report on Genomic Medicine and the Department of Health's response to this report.

- **Array CGH**

This has become part of the service repertoire in many laboratories. ACC contributed to meetings organised by both UKGTN and the Reference Laboratories in 2009 to educate commissioners, public health and other non-genetic specialists about this technology and the need for appropriate and equitable funding for the service.

- **Workload currencies**

ACC and CMGS are currently reviewing workload currencies as part of a piece of work, led by UKGTN, on pricing and national tariffs.

## 5. MLC Report

- Ian Cook (Leeds) will be taking over as MLC Chair
- Delegates are encouraged to visit the MLC stand in the scientific poster area
- The MLC will be recruiting new members – if anyone is interested, please have a chat with Ian or Philippa at the stand – you don't have to be elected to Council to be on the MLC
- Three anonymous examples of CPD portfolios which were successful in the October 2009 HPC audit have been posted on the MLC pages of the website – remember 2.5% of all Clinical Scientists will be audited in October 2011
- The MLC have written an HPC approved CPD portfolio which should appear on the HPC website shortly
- Anyone who has questions or comments should email [mlc@cytogenetics.org.uk](mailto:mlc@cytogenetics.org.uk)
- Delegates are reminded to attend the MLC session on Wednesday at 2pm – Jonathan Jones (Publications Manager at the HPC) has been invited to give feedback about the CPD audit of Clinical Scientists

## 6. ETC Report

- **Modernising Scientific Careers (MSC)**

The years activities have been dominated by Modernising Scientific Careers (MSC), which several members of the ETC have played an important role. The early part of the year saw involvement in curriculum development for both the Practitioner and the Scientist Training Programmes. This was followed in the autumn by the launch of the pilot scheme onto which 12 PTP and 12 STP's were taken, funded centrally by the MSC scheme. The University of Nottingham was appointed as the Higher Education Institution providing the academic component of the course.

In February 2010 the long awaited Consultation document was published along with the policy document "Modernising Scientific Careers – The UK Way Forward", and recently all the English SHA's have agreed to fund their training through the MSC.

Updates about MSC are now being communicated via a Newsletter to all HoDs and put on the website.

- **Grade A Training**

Support for trainees currently in the Grade A scheme has been ongoing, with the first (of the two) week courses already having been held, the second is planned for June. Support to see all those currently in the system is planned, however as of now, no new recruits to the Grade A scheme will be able to be supported by the profession.

- **Workforce Data**

This continues to be collected and distributed, and is considered as a valuable resource. During the year the RCPATH had investigatory meetings to consider a unified database for all the Healthcare Science workforce, and whilst this was supported by the ACC, the likelihood of funding being able to support such a scheme has meant that its development has currently been put on hold.

- **Virtual Study Group for FRCPath**

This study group run by the National Trainer (Gavin Cuthbert) proved very successful with 13 (out of 14) candidates passing the written paper of part 1

- **Joint Education Committee for ACC/GMGS**

At present discussions are underway between the two professional bodies to form a new joint education committee (to replace both the TAB and the ETC) in response to the introduction of the MCS training scheme. This is very much a work in progress and no firm decisions regarding the structure have yet been taken.

## 7. AGTC Report

The AGTC carried out a survey in July 2009 (additional information was obtained and added in Oct 2009).

- There are currently 302 Genetic Technologists at Career Frame Work 5 and above.
- 173 eligible Genetic Technologists of which 96 are registered (56%).

- 77 eligible Genetic Technologist's who are not registered (44%).
- 58 Genetic Technologist's who are members of the Professional Bodies (ACC and CMGS) (19.2%).
- Due to the speed of progress of the implementation of Modernising Scientific Careers, it has become clear that all 'aspirant' Healthcare Science groups must progress their applications for statutory registration as a matter of urgency. Genetic Technologists are considered to be an 'aspirant' Healthcare Science group.

AGTC is preparing evidence to support the application for statutory regulation.

There are 10 criteria that the Voluntary Register must meet:

1. The occupation must cover a discrete and homogenous area of activity.
2. The occupation must apply a defined body of knowledge.
3. The occupation must practice based on evidence of efficacy.
4. The occupation must have at least one established professional body which accounts for a significant proportion of that occupational group.
5. The occupation must operate a voluntary register.
6. The occupation must have defined entry routes.
7. The occupation must have independently assessed entry qualifications.
8. The occupation must have standards of conduct, performance and ethics.
9. The occupation must have fitness to practise procedures to enforce those standards.
10. The occupation must require commitment to continuous professional development (CPD).

These 10 criteria are almost met.

There are a few areas that need to be strengthened before we can submit our application – *HPC require >25% of GTs to be members of a professional body – currently only 19% fulfil this criteria. It is therefore vital that more GTs become members of the professional body. The Department of Health has established a group to progress registration for Healthcare Scientists and any aspirant group will only be included if a robust voluntary register is in place. All Genetic Technologists who are eligible for registration should join the voluntary register at the earliest opportunity and also join the professional body to ensure that all criteria for the voluntary register are met.*

## 8. Professional Standards Committee Report

Lorraine Gaunt and Jonathan Waters stepped down in December 2009 as both had accepted different professional responsibilities – many thanks to both for their work over the last three years.

Nick Bown (Oncology) and Carolyn Campbell (Constitutional) took over as leads - aim to continue format adopted by LG & JW i.e. recruit colleagues for specific tasks rather than have formal committee.

### Constitutional BPGs

- Prenatal diagnosis guidelines published Dec 2009 (to replace separate AF and CVS guidelines)
- Solid tissue guidelines now completed and will be published soon
- Kim Smith and Eddy Maher to undertake review of Array guidelines
- Review of Clinical Cytogenetics and Postnatal samples guidelines due – if you are interested in being involved in either of these reviews please contact Carolyn Campbell

### Oncology BPGs

- First draft of solid tumour guidelines circulated for comment – deadline end April 2010
- First draft of CLL TP53 guidelines circulated for comment completion imminent
- First draft of FISH in haemato-oncology guidelines were circulated for comment. Further revisions will be co-ordinated with preparation of Disease specific guidelines (AML & MDS; Lymphoma; ALL; CML & MPNs) – individuals have been identified to lead on these – first drafts to be completed by end May 2010

## 9. Treasurer's report

The financial statement for year ended 31 December 2009 was presented. It was noted that there was a decrease in the overall balance of approx £15,000 due to a Training and Education overspend. The accounts will be available on the website.

Two travel awards had been granted in 2009.

Moving from four to three ACC council meetings had made a £3,000 saving.

**Adoption of Accounts.** The accounts were audited by Wilkins Kennedy. Val Davison proposed and Gordon Lowther seconded adoption of the accounts. The accounts were adopted unanimously.

Katie Waters proposed and Val Davison seconded reappointment of Wilkins Kennedy as auditors. This was accepted unanimously.

**10. Correspondence**

None.

**11. Matters arising from AGM held on 27 April 2009**

None.

**12 Any other business**

Chair thanked outgoing council members for their hard work over their respective terms of offices- Teresa Davies, Rod Howell, Philippa May, Hazel Denning and Anne Reilly.

Chair offered congratulations to Val Davison on receiving the CSO Leadership Award in 2009

At this point Kim Smith handed over to the incoming chair Angela Douglas.

Angela started by thanking Kim on behalf of the profession for her outstanding contribution as chair.

New council members were welcomed -

Secretary: Simon McCullough.

Ordinary members: Lara Cresswell, Dom McMullan, Sian Morgan.

Trustees: Kim Smith, Tony Parkin

Genetic Technologist: Nicola James.

She invited any questions from the floor. There were none and the meeting closed.