



Tool: Model Terms of Reference and suggested activities

*This document is part of the **Genomics and Your Hospital toolkit**, a resource developed to support a 'whole of hospital' approach to genomic care. The complete toolkit is available at GenomicsToolkit.org.au.*

The genomics toolkit was co-designed with Victoria's leading health services. During the process, it was identified that having a kick-off meeting with hospital executives and clinical leadership was highly valuable. It enabled health services to coordinate and plan genomic care at an organisational level, ensuring quality and best practice while reducing risks and unwarranted variation.

This tool was developed as a 'model' *Terms of Reference* for your genomics leadership group. Please adapt the tool to suit your hospital's specific considerations. This document also includes a list of suggested activities that your group may wish to undertake.

Model *Terms of Reference* for the genomics leadership group

Please adapt these as required and relevant for your local circumstances.

Purpose

The purpose of the [*Genomics Leadership Group*] is to support hospital readiness for genomic care and ensure that genomics is used appropriately, safely and effectively in clinical practice across the organisation. With an organisation-wide perspective, the [*Genomics Leadership Group*] can provide strategic oversight, governance and advice to both individual departments, and the service as a whole, to support implementation and sustained use of genomic medicine.

The [*Genomics Leadership Group*] brings together diverse perspectives – including people with clinical, administrative, technical and risk management expertise – to foster a shared 'language' and understanding of the use and value of genomics to the organisation.

Term

This *Terms of Reference* is effective from [DD/MM/YYYY] and continues until [DD/MM/YYYY].



Membership



Identify key leaders with the right expertise

Members of the group should have appropriate decision-making authority and be willing to contribute to discussions on the barriers and challenges to implementing genomic testing within your hospital. Depending on the needs of your health service, they may include leaders with some or all of the following expertise.

- An executive sponsor (CEO or executive director)
- Relevant quality team leads
- Relevant department leads for pathology, pharmacy and genetics
- Specific head(s) of department/program director(s) using or interested in using genomic medicine (e.g., cardiology, nephrology, pharmacy, infectious diseases etc.)
- Workforce leaders (for your medical, genetic counsellor, laboratory and pharmacy workforces in particular).
- An EMR/bioinformatics lead
- Consumer expertise

Key responsibilities

The following is a list of suggested responsibilities your genomics leadership group may wish to undertake.

Effective leadership of genomic implementation

- Oversee effective clinical governance of genomic implementation.
- Ensure a culture of genomic care that is positive, just and supports innovation, improvement and collaboration.
- Communicate genomics strategy, priorities, challenges and achievements.
- Maintain oversight of genomic care, including oversight of data monitoring for activity, cost, quality and risk.
- Ensure reporting and escalation processes for genomics leadership group into broader organisational systems and processes.
- Identify and provide advice on emerging issues of relevance to the implementation and sustained use of genomics in the health service.

Organisational strategy and capability

- Consider and agree on the scope of genomic medicine that the hospital will undertake now and into the future.
 - What is in scope?
 - What is out of scope?
 - Do you have sufficient staff and other resources for the proposed scope? If not, how will these be achieved?
 - Consider whether an agreement or partnership with an external site may be required to facilitate safe and effective care.
- Identify key organisational-level decisions required to effectively implement genomics and recommend action to support these.



- Consider what your approach will be to build genomic care into your existing models of care.
 - How will organisational change be supported?
 - Who are your key leaders for genomics-based organisational change?
 - How will genomic specific changes be linked to existing organisational systems and approaches?

Professional governance, including credentialling

- Determine workforce support, training and credentialling requirements for your current and future scope to be safely and effectively undertaken.
- Determine who has professional governance of all groups involved in genomic medicine and whether these are optimal for performance and professional development and role support.

Clinical governance

- Determine how new genomic medicine activity will be reviewed for safety, effectiveness and cost effectiveness.
- Determine and monitor stewardship and related controls available at the hospital. For example:
 - Is there a robust multi-disciplinary team in place for review of test appropriateness? How are cases selected? Who attends? What resources are required?
 - Is there sufficient, and sufficiently skilled laboratory capacity to screen test requests for appropriateness?
 - What are the escalation procedures? For example, who are the genomic champions, geneticists and genetic counsellors for clinicians to contact?

Risk management

- Develop a system for identifying and managing genomics specific risks.
- Act as a forum for discussion of response to clinical issues and risks arising and, where appropriate, advise on escalation.
- Be a point of contact for the organisation to escalate site-specific risks.

Models of care

- Determine the key elements of the model(s) of care and any funding, resources, people and equipment required to achieve the model of care.

Continuous measurement, monitoring and improvement

- Determine what audit or peer review processes will be implemented for clinicians involved in genomic medicine and whether this differs across roles.
- Consider opportunities for research, benchmarking and communities of practice relating to genomic medicine.



Consumer participation

- Consider what your approach will be to embed respectful and meaningful consumer involvement into all aspects of your genomic care.
- Consider resources and training required to support this.

Other



You may wish to insert your organisation's standard *Terms of Reference* clauses here.

Logistical factors such as meeting frequency will depend on your organisation's needs. Your group may wish to meet more frequently at the start.

How was this tool developed?

These tools were developed as part of the Genomics and Your Hospital toolkit by the Melbourne Genomics Health Alliance, with ongoing input from Victorian healthcare leaders.

Forming a genomics leadership group was identified as a key action for health services to undertake when planning for genomic medicine. Using an iterative, co-design approach, these tools were drafted and reviewed with members from the Melbourne Genomics *Hospital Implementation Reference Group* to support hospitals complete this action.

These tools are now ready for use. But it remains a living resource that will evolve as genomics becomes a greater part of routine care.