



# ANNUAL REPORT 2016

Canadian Association  
of Gastroenterology



L'Association Canadienne  
de Gastroentérologie



## ***A message from our President***

Looking back, the past year can be summed up in one phrase ... "Quality in Digestive Health Care".

As a result of the growth of activity in the quality area, the CAG formalized a new Quality Affairs portfolio to oversee CAG's many quality initiatives that continue to evolve and expand. The Skills Enhancement for Endoscopy® (SEE®) program has grown exponentially with additional certified centres, certified faculty and courses offered across the country. In addition, the Practice Audit in GastroEnterology (PAGE) program for colonoscopy was launched and offers Section 3 accreditation. Meanwhile, the Canada – Global Rating Scale® (C-GRS®) program, a web-based questionnaire tool to promote high quality patient-centered endoscopy services in Canada, received official endorsement from the National Colorectal Cancer Screening Network and was adopted by the Canadian Partnership Against Cancer (CPAC). In the past year, the CAG achieved an astonishing record of developing three Clinical Practice Guidelines that made the front cover when published in Gastroenterology! The bar has been set high for next year!

Looking ahead, we are confident that these quality initiatives will change the way gastroenterologists practise and they will, ultimately, improve patient outcomes.

Effective communication and dissemination of the information from our many quality projects requires high quality, accredited educational programming. In 2016, CAG Education Affairs received a record, unprecedented number of exemplary ratings from the Royal College with our 2015

recertification as an accredited Continuing Professional Development (CPD) provider.

These accomplishments are only a few highlights from the past 12 months. I encourage you to review the Current & Upcoming Initiatives for more details on the exciting new directions that the CAG is taking with innovative Quality, Clinical, Education and Research Programs to expand its role as the leader and national voice for gastroenterology and digestive health in Canada.

The CAG is recognized as one of the leading medical professional societies in Canada and its success is due to the exceptional efforts of the many members who volunteer their time and expertise to improve the delivery of digestive health care in Canada. The CAG Board of Directors would like to take this opportunity to thank all of those who have contributed to the outstanding accomplishments of the CAG over the last year.

David Armstrong, MA, MB, BChir, FRCPC

The Practice Audit in GastroEnterology (PAGE) on consecutive colonoscopies, which reports key variables to endoscopists in real time, was launched allowing participants to earn Section Three credits.

The C-GRS<sup>®</sup> was adopted by the Canadian Partnership Against Cancer (CPAC) and endorsed by the National Colorectal Cancer Screening Network.

Three CAG Clinical Practice Guidelines have been published in *Gastroenterology* over the past year; Management of IBD in Pregnancy, Treatment of *Helicobacter pylori* Infection, and Video Capsule Endoscopy.

The CAG Skills Enhancement for Endoscopy<sup>®</sup> Program continues to expand with a total of twelve certified centres, 17 certified faculty, and 16 faculty-in-training, delivering more than 100 courses to over 300 delegates over the past four years.

In April, the CAG Board disseminated the 2016 – 2020 strategic plan for the Association.

The IMAGINE-SPOR Chronic Disease Network, led by Dr. Paul Moayyedi, awarded a \$12.5 million grant from the Canadian Institutes of Health Research, involves a large number of investigators and researchers from across the country as well as a number of partners, including the CAG.

The CAG received a record, unprecedented, number of exemplary ratings from the Royal College with our recent recertification as an accredited Continuing Professional Development provider.

This year's Fall Forum for the CAG leadership featured Dr. Graham Dickson, PhD (Professor Emeritus at Royal Roads University). His interactive workshop focused on describing some of the major reform themes in Canadian healthcare. This included critically analyzing the skills of effective leadership and followership and their influence on the role of coach or player.

## Past 12 Months *in Review*

## Current & Upcoming Initiatives

### Administration Affairs

A task force is exploring option for a scientific publication venue for the Association and its members.

### Clinical Affairs

A number of Clinical Practice Guidelines are being developed, including IBS, bile acid malabsorption, Crohn's disease, as well as an update of the Upper Gastrointestinal Bleeding guideline.

Practice Affairs is developing a program to train new GRADE methodologists.

With funding from the Canadian Partnership Against Cancer (CPAC), the CAG is developing Clinical Practice Guidelines on colon cancer screening for high risk patients. This work represents an important continued partnership with the CPAC.

### Education Affairs

Development of a variety of Section Three credit options for physicians including incorporation of these credit options at CDDW™.

Introduction of a hands-on session at CDDW™.

### Quality Affairs

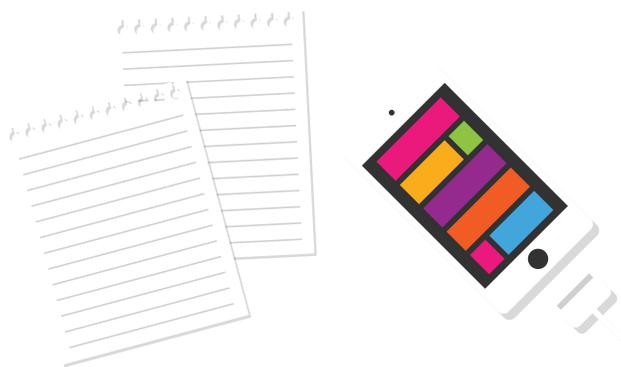
The SEE® Program is evolving to meet the needs of the membership with an aim to developing a new hands-on course on polypectomy.

An IBD specific Global Rating Scale (GRS) is being developed as a quality improvement tool for those delivering care to IBD patients.

The C-GRS®, which is currently used by over 130 Canadian endoscopy units to deliver a patient-centred quality experience, is being translated to French to encourage broader use/applicability.

### Research Affairs

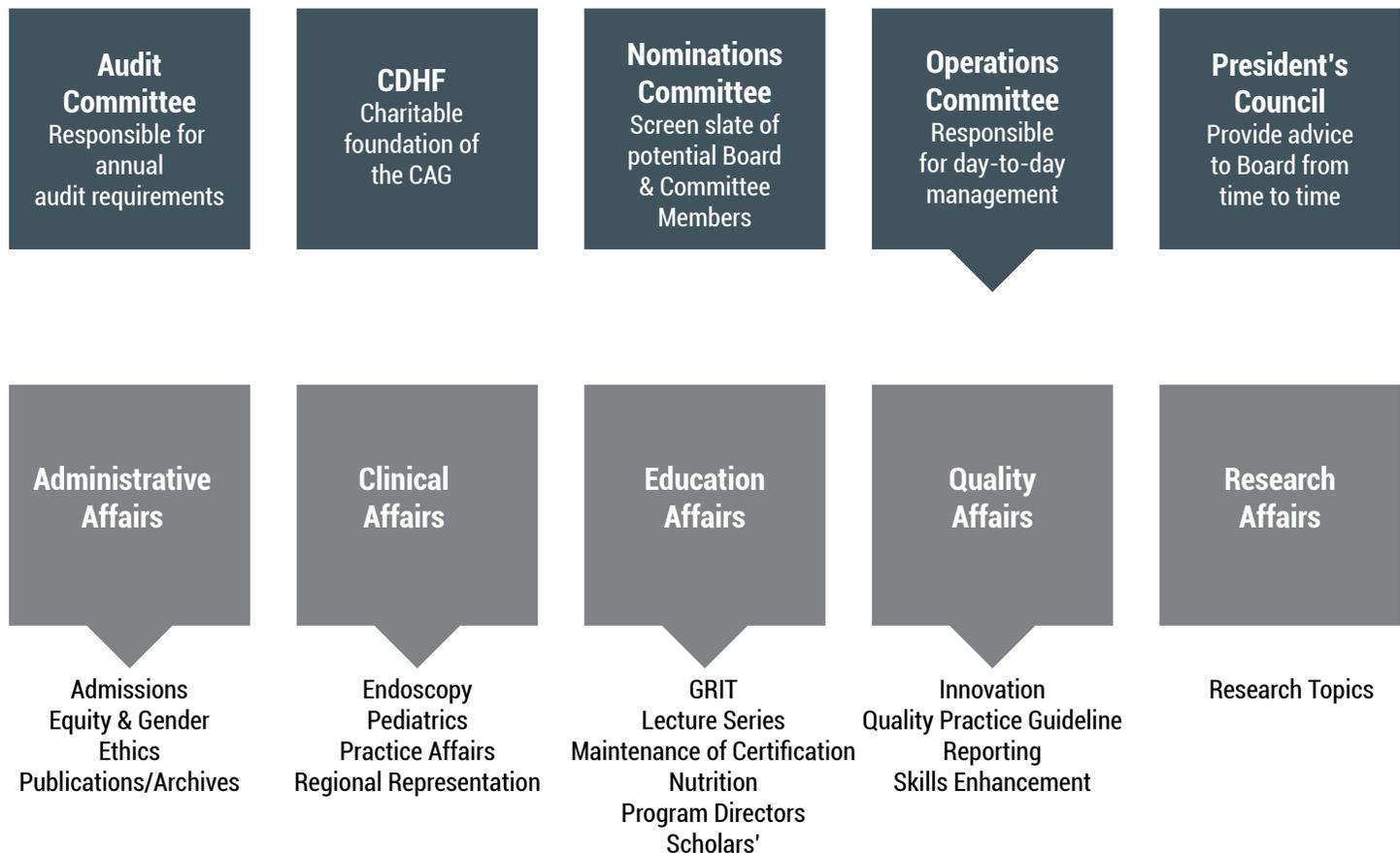
Exploration of how the Association can help the development and support of Clinician Scientists.



# Organizational Structure

**CAG Members as Owners**

**Board of Directors**  
Responsible for managing the properties and activities of the CAG



## Board of Directors

The Board directs the overall course of the organization through quarterly teleconferences and twice-yearly meetings. The mandate of the Board includes developing policies, monitoring operations, identifying and managing risk and the financial position of the Association, establishing members' dues, electing officers, and appointing committees.

Like the various committees and sub-committees, the Board does not receive payment for service, despite the significant amount of time invested. The Board welcomes your comments and suggestions which you may forward via the National Office ([general@cag-acg.org](mailto:general@cag-acg.org)).



**President**  
2016-2018

**David Armstrong, MA,  
MB, BChir, FRCPC**

**Professor of Medicine  
McMaster University**

*Hamilton, ON*

**President Elect**  
2016-2018

**Nicola L. Jones, MD,  
PhD, FRCPC**

**Professor of Paediatrics  
and Physiology**

**University of Toronto**

*Toronto, ON*

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& Pharmacology**

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*Calgary, AB*

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**Professor and Head  
of Physiology and  
Pharmacology**

**University of Calgary**

*Calgary, AB*

**VP Secretary**  
2016-2021

**Carlo A. Fallone, MD,  
FRCPC**

**Associate Professor of  
Medicine**

**McGill University**

*Montréal, QC*

## Board Committees



**President's Council**

*David Armstrong, Chair*

**Nominations Committee**

*Carlo A. Fallone, Chair*

**Operations Committee**

*Paul Sinclair, Chair  
Executive Director, CAG*

**Audit Committee**

*Wallace MacNaughton,  
Chair*

**Canadian Digestive  
Health Foundation  
(CDHF)**

*Richard Fedorak,  
President*

## Operations Committee



**VP, Administrative  
Affairs**

*Christopher Andrews  
University of Calgary*

**VP, Clinical Affairs**

*Lawrence Hookey  
Queen's University*

**VP, Education Affairs**

*Kevin Waschke  
McGill University*

**VP, Quality Affairs**

*Paul Moayyedi  
McMaster University*

**VP, Research Affairs**

*François Boudreau  
Université de Sherbrooke*

## **Administrative Affairs**

The administrative aspects of CAG are some of the most critical, supporting the structure and ensuring the viability and growth of the organization. The four working groups that comprise Administrative Affairs reflect the Association's philosophy of accountability, transparency and effective communication.

**Christopher Andrews, VP**

### **Admissions**

encourages membership and reviews/approves applications for membership from qualified professionals.

**Louis Liu, Lead**

### **Equity & Gender**

identifies important issues related to gender and visible minorities for discussion and action.

**Melanie Beaton, Lead**

### **Ethics**

establishes/updates guidelines for ethical standards in patient care, research, education, and industry interaction, and increases understanding of biomedical ethics in gastroenterology.

**Louis-Charles Rioux, Lead**

### **Publications/Archives**

is responsible for all CAG publications/communications including the website and advising the journal editor, and oversees the archives.

**Jerry McGrath, Lead**

## **Clinical Affairs**

With gastroenterologists and their trainees comprising the largest group within the membership, Clinical Affairs is at the core of the Association. Clinical Affairs and its Leads enhance CAG's ability to respond quickly to the concerns of practitioners, such as lobbying governmental agencies for additional funding of new medications, new interventions, as well as development of Clinical Practice Guidelines.

**Lawrence Hookey, VP**

### **Endoscopy**

represents CAG on matters relating to endoscopy and promotes competence and training in the field, including development of credentialing guidelines in endoscopic procedures.

**Steven Heitman, Lead**

### **Pediatrics**

represents the interests of pediatric gastroenterologists and researchers.

**David Mack, Lead**

### **Practice Affairs**

provides a forum to address issues relevant to clinical members of CAG including ongoing training, knowledge dissemination, practice-related issues and Clinical Practice Guidelines.

**Grigorios Leontiadis, Lead**

### **Regional Representation**

serves as a channel of communication between CAG and provincial/regional gastroenterology associations.

**Josée Parent, Chair**

## Education Affairs

Professional education has long remained a priority and strength of CAG - surveys show that members rate Canadian Digestive Diseases Week™ (CDDW™) as the most important service provided by the Association. Given the scope and importance of its activities, Education Affairs is divided into several sub-committees, each with a specific mandate.

### Kevin Waschke, VP

#### Gastroenterology Residents-in-Training (GRIT) Course

is a high-caliber, internationally-recognized, annual training program for gastroenterology/hepatology residents held in association with CDDW™.

**Geoff Williams,  
Senior Co-Chair**

#### Lecture Series

is a monthly national videoconference for gastroenterology residents with presentations from national and international experts.

**Brian Yan, Co-Chair  
Maria Cino, Co-Chair**

#### Maintenance of Certification (MOC)

reviews and approves submissions for Section 1 and Section 3 RCPSC accreditation of educational events.

**Connie Switzer, Chair**

#### Nutrition

maintains a census of Canadian nutrition experts and programs, links clinical nutrition fellowships with formal academic training, and encourages nutrition fellows to consider a career in community practice.

**Maitreyi Raman, Lead**

#### Program Directors

are elected via a process established by the RCPSC with the mandate of overseeing the standardization and maintenance of the quality of gastroenterology training programs in Canada.

**Winnie Wong, Chair**

#### Scholars' Program

is an annual course preceding CDDW™ that encourages medical students and internal medicine residents to consider a career in gastroenterology.

**Herbert Brill, Chair**

## Quality Affairs

Recognizing that resources are limited, in 2004 the CAG prioritized quality assessment initiatives in gastroenterology to ensure that limited human and other resources are optimally utilized for patient care. Quality projects grew so substantially in the following years that in 2016 CAG restructured to make Quality Affairs its own division of Operations.

### Paul Moayyedi, VP

#### Innovation

evaluates how best to develop quality metrics and assess how effective they are at improving quality.

#### Quality Practice Guideline

develops quality guidelines relevant to endoscopic and clinical practice. Currently Quality Practice Guideline encompasses the two areas of endoscopy and inflammatory bowel disease.

#### Reporting

makes recommendations for content and standards related to point-of-care medical record systems that incorporate quality measures developed by Quality Affairs.

#### Skills Enhancement

addresses issues relevant to life-long learning in gastroenterology, the main focus of which is on closing the loop with regard to quality guidelines that have been developed.

**Maida Sewitch, Co-Chair**  
**Geoff Nguyen, Co-Chair**

**Catherine Dubé, Chair**

**Peter Rossos, Chair**

**Don MacIntosh, Co-Chair**  
**Alaa Rostom, Co-Chair**

## Research Affairs

In contrast to Administrative, Clinical, Education and Quality Affairs, Research Affairs encompasses a committee of twelve, chaired by VP, Francois Boudreau, and is responsible for overseeing a number of key initiatives listed above. Other important initiatives include: Research Workshop Grant, Research Conference Grant, and PhD Scholarship Awards.

### Francois Boudreau, VP

#### CAG/CIHR/Industry

**Partner Research Program** is the pride of CAG. Partners and CIHR provide 1- 5 years of funding to junior clinicians and PhD scientists. CAG appreciates the support from AbbVie, Allergan, Crohn's & Colitis Canada, PENTAX, and Takeda for this program.

#### CDDW™

Research Affairs reviews approximately 350 abstracts and plans the basic science symposia and paper and poster sessions.

#### Summer Studentships, Resident Research Awards & PhD Scholarship

programs provide key opportunities for trainee research training and experience towards establishing new researchers. CAG appreciates the support from Crohn's & Colitis Canada, Shire, Ferring and Allergan for the these award programs.

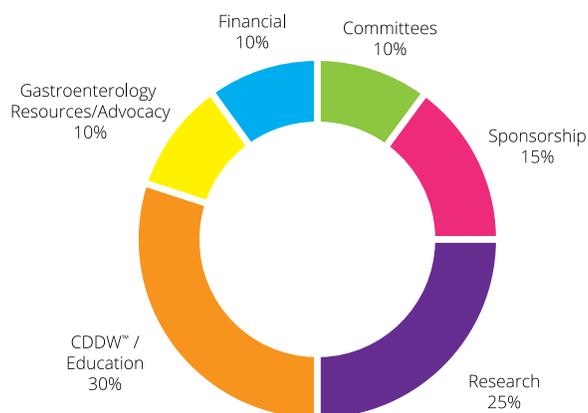
#### Research Topics in Gastrointestinal Disease Meeting

is an annual meeting held before CDDW™, where basic science and clinical trainees come together to present their research and network.

**Elena Verdu, Co-Chair**  
**Carla Coffin, Co-Chair**

## National Office

The national office works with the Board, Operations Committee, and committees to support initiatives and achieve the goals of the Association. Central to the organization is the Executive Director, whose role involves chairing the Operations Committee, advising the Board, strategic planning and fundraising, and overseeing office staff and activities. National office responsibilities may roughly be divided into six broad categories.



### Annual Conference

For CDDW™ 2016, over 330 accepted abstracts were sorted and laid out for the final program, and office staff liaised with the approximately 200 speakers and co-chairs to solidify the program which offered over 90 hours of Section 1 accredited learning and up to 31 credits per delegate. The staff works behind the scenes to direct the conference planner and manage details on a weekly basis between the kick-off of planning each spring and the close of meeting finances the following June/July.

As an RCPSC-approved national provider of accredited gastroenterological education, the CAG annually accredits many local meetings. In addition, accredited co-developed events – in which CAG works with industry to develop the educational program – have become increasingly popular. Coordinating these many educational programs demands significant time from national office staff and the members of the Maintenance of Certification sub-committee.

### Research

In 2016, eleven fellowships, one grant, sixteen summer studentships, and five resident research awards were awarded. The Executive Director liaises with government agencies such as CIHR and our research sponsors, and oversees the over 35 ongoing fellowships, grants and trainee research awards.

### Sponsorship

Since CDDW™ is run as a not-for-profit event, funds to run the Association are raised through corporate sponsorship. In 2016, thirteen partners (acknowledged on the final page of this report), including eight BENEFACTOR sponsors, have provided support to the CAG.

### Gastroenterology Resources/Advocacy

The office coordinates activities related to CAG's digestive healthcare initiatives, which in 2015-2016 included the Quality Program - Endoscopy, and the SEE® Program.

### Committees

The national office provides continuous guidance and support to the Board and Operations Committee, their committees and projects, and plays an active role in over 40 administrative meetings (board, committees, sponsors, etc.) held during the week of CDDW™.

### Financial

Strategic planning and fundraising efforts of the executive, Executive Director, and VP Treasurer have succeeded in raising over \$3 million in revenue in the 2015/2016 financial period.

**Come visit us!** 1540 Cornwall Road, Unit 224 | Oakville, ON L6J 7W5



**Paul Sinclair**  
Executive Director

**Sandra Daniels**  
Senior Manager

**Palma Colacino**  
Project Manager

**Joanne Ardron**  
Project Manager

**Karen Sparkes**  
Project  
Coordinator

**Lesley Marshall**  
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Coordinator

**Jacqueline Fell**  
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**Cathy Mancini**  
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