2017 ANNUAL REPORT
We invite you to experience **CDDW™ 2018**

Canadian Digestive Diseases Week™ (CDDW™) is Canada's premiere educational conference which showcases the best of Canadian gastroenterology and hepatology research. It provides a venue for colleagues and partners to meet. Whether you work in patient care, research, education or administration, CDDW™ is the place to be!

#CDDW2018
The overarching theme of the Association’s work during 2016-2017 continues to be one of quality – enhancing the skills and knowledge of endoscopists and digestive healthcare physicians which, in turn, translates to improved care for Canadians with gastrointestinal disease.

It is important and exciting to review where the CAG started with its quality initiatives, and all that has been achieved since. Back in the early 2000’s Drs. Roland Valori and John Anderson led a large national improvement and training program that transformed endoscopy services in England. This was noticed in Canada, where it became clear that efforts to increase resources needed to include a means of evaluating and optimizing how those resources were being used. Thus began the CAG’s work, from 2004 onward, to explore human resources in gastroenterology, set appropriate wait times for gastroenterology services and monitor actual waits, and look to improve the quality of endoscopy services.

As a view to our humble beginnings, in 2008 there were 20+ endoscopy units in Canada using the UK Global Rating Scale to evaluate the patient-centred quality of their endoscopy services. This has grown by mid-2017 to over 150 sites – and still rapidly growing – that now use a Canadian revision of the original UK tool (C-GRS©). Quality service has spread to other clinical areas, with a GRS for managing IBD patients nearing completion.

Various members between 2006 and 2008 had attended one of the UK hands-on courses to improve endoscopy skills. Today the CAG has its own well-established and much sought-after Skills Enhancement for Endoscopy™ (SEE™) program (built on the UK system) with 122 courses conducted as of June 2017, 17 trained Canadian faculty and 17 more faculty in training. Interest in the SEE™ program continues to skyrocket and expand to other specialties: it is a major milestone that the CAG now has agreements with the Canadian Association of General Surgeons and the Canadian Society of Colon and Rectal Surgeons towards endoscopy training.

Beyond endoscopy, the CAG continues to lead the way in the area of high-impact clinical practice guidelines. Since 2014 the Association has had five such guidelines published in the prestigious journal Gastroenterology, with more guidelines currently under development. With the launch, this year, of its new journal, the Journal of the Canadian Association of Gastroenterology (JCAG), the CAG will enhance the dissemination of Canadian guidelines and Canadian research in coming years.

These are just a few of the exciting landmark achievements of your Association, none of which would have been possible without the continued support of our members. We encourage you to keep abreast of other directions via the website, monthly newsletters and annual conference.

“it is a major milestone that the CAG now has agreements with the Canadian Association of General Surgeons and the Canadian Society of Colon and Rectal Surgeons towards endoscopy training” – David Armstrong
The SEE™ program continues to be in high demand. In the past year alone 35 Colonoscopy Skills Improvement (CSI) and 9 Train the Endoscopy Trainer (TET) courses were held, for a total of 373 delegates trained. For more details including a new video of colonoscopy vignettes we invite you to visit the CAG website. Regarding further delivery of SEE™ training, the Association has signed memorandums of understanding with the Canadian Association of General Surgeons and the Canadian Society of Colon and Rectal Surgeons. In addition, the CAG was pleased to note that Cancer Care Ontario, in their June 2017 guidance document, strongly encourages endoscopists who perform fecal immunochemical test (FIT) positive colonoscopies to complete a SEE™ course!

The introduction of hands-on SEE™ stations at CDDW™ was a success and will be incorporated into CDDW™ 2018. These practical and highly interactive sessions provide hands-on training for a limited number of delegates as they rotate through 6 stations, each focusing on a particular procedure.

The C-GRS© – CAG’s online tool to support endoscopy units in evaluating and improving the quality of the patient-centred care they deliver – was adopted by the Canadian Partnership Against Cancer (CPAC) and endorsed by the National Colorectal Cancer Screening Network. A poster on C-GRS© use in Canada was presented at the International Cancer Screening Network Meeting in June in Bethesda, Maryland.

In February 2017 The Association was pleased to see yet another of its guidelines published in the high-profile journal Gastroenterology: Clinical Practice Guidelines for the Use of Video Capsule Endoscopy. Congratulations to Drs. Robert Enns, Lawrence Hookey, and their colleagues!

The Practice Audit in Gastroenterology (PAGE) is a real-time audit of key measures related to colonoscopy which allows endoscopists to assess performance and compare their results to national findings. The audit has now been refined to allow users customization by de-selecting questions, thus making it more streamlined and applicable to their needs. RPAGE, a similar tool geared to gastroenterology residents and their program directors, is also now customizable.

In preparation for the new 2018 Royal College National Standard for Support of Accredited CPD Activities, CAG processes and templates have been revised to comply with the Standard. The CAG and co-developing industry partners are continuing to develop a variety of unique, high quality Section One and Section Three accredited programs to meet the memberships’ educational needs. The CAG ePortal has been updated with a new look and improved functionality.

We are delighted to introduce a revised and enhanced CAG website that addresses your feedback. It has improved mobile responsiveness, easier to navigate MY CAG log in, improved online forms, improved ePortal navigation, a new Guideline Library, improved news functionality, and a streamlined accreditation portal.

The CAG is delighted to have a new Journal, the Journal of the Canadian Association of Gastroenterology, on board with our new publisher, Oxford University Press.
After much anticipation, the CAG is pleased to be offering a new Skills Enhancement for Endoscopy™ course – on polypectomy – beginning in late 2017. Initial courses are already full and additional courses will continue to be held throughout 2018. All Canadian practising endoscopists are eligible to apply.

As interest in the C-GRS® grows including in Quebec, the CAG recognized the need to provide a French translation which has been completed and will be made available to sites later this year. In addition, the Association has had extensive discussions with Cancer Care Ontario regarding use of the C-GRS®.

A new C-GRS® platform is being developed during late 2017 and early 2018 to meet the huge increase in capacity, as more and more endoscopy units request to participate in this aspect of the CAG’s Quality Program - Endoscopy. Look for this exciting new look and functionality to be available with the opening of the spring 2018 cycle for data entry on March 1!

In 2018 the CAG will offer the Monday of CDDW™ for special interest groups (SIGs) to hold their meetings. The CAG SIGs exist to support members in pursuit of special interests within the Association, to aid in forming and maintaining liaison among those with special interest, and to provide advice to the Association, as needed, on issues related to the SIG’s area of interest. The four SIGs being held on Monday, February 12 in Toronto include: Canadian Neurogastroenterology Network Annual Meeting, IMAGINE, Nutrition and Quality. The Quality SIG will take the form of an endoscopy quality symposium the CAG will host, in collaboration with Drs. Roland Valori and John Anderson from the UK, creators of the original GRS and colonoscopy skills training approach from which CAG’s C-GRS® and SEE™ program arose.

NEW this year, the CAG National Basic Science and CanMEDS Lecture Series Co-Chairs are encouraging trainee participation and enhanced learning through a Participation Points Program. Trainees earn points in 7 ways: attending, interacting, volunteering, sharing and by completing pre-tests, post-tests and evaluations, or by developing a Personal Learning Project. The top 5 trainees with the highest point score will WIN one free night’s accommodation for CDDW™ 2019 at the Fairmont Banff Springs!

The CAG, in partnership with the Canadian Partnership Against Cancer (CPAC), has developed Clinical Practice Guidelines on Screening for Colorectal Cancer in Individuals with a Family History of Nonhereditary Colorectal Cancer or Adenoma. The committee is currently working on the manuscript and hope to have it published early in 2018.

A number of Clinical Practice Guidelines are being developed, including pediatric Crohn’s disease, bile acid diarrhea, and an update of the upper gastrointestinal bleeding guideline.

Practice Affairs is continuing the development of a program to actively recruit and train new GRADE and guideline methodologists for involvement in the CAG Clinical Practice Guidelines. This role is essential in maintaining the extremely high standard that the CAG guidelines have become internationally recognized for, and will be best supported by developing additional GRADErs.
Board of Directors
Responsible for managing the properties and activities of the CAG

Organizational Structure

CAG Members as Owners

CDHF
Charitable foundation of the CAG

Audit Committee
Responsible for annual audit requirements

Nominations Committee
Screen slate of potential Board & Committee Members

Operations Committee
Responsible for day-to-day management

President’s Council
Provide advice to the Board from time to time

Administrative Affairs
- Admissions
- Diversity & Equity
- Ethics
- Publications/Archives

Clinical Affairs
- Endoscopy
- Pediatrics
- Practice Affairs
- Regional Representation

Education Affairs
- GRIT
- Lecture Series
- Maintenance of Certification
- Program Directors
- Scholars’

Quality Affairs
- Innovation
- Quality Practice Guideline
- Reporting
- Skills Enhancement

Research Affairs
- Research Topics
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 via email at general@cag-acg.org!
### BOARD COMMITTEES

<table>
<thead>
<tr>
<th>President’s Council</th>
<th>Nominations Committee</th>
<th>Operations Committee</th>
<th>Audit Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>David Armstrong, Chair</td>
<td>Carlo Fallone, Chair</td>
<td>Paul Sinclair, Chair</td>
<td>Elena Verdú, Chair</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Executive Director, CAG</td>
<td></td>
</tr>
</tbody>
</table>

### OPERATIONS COMMITTEE

<table>
<thead>
<tr>
<th>VP, Administrative Affairs</th>
<th>VP, Clinical Affairs</th>
<th>VP, Education Affairs</th>
<th>VP, Quality Affairs</th>
<th>VP, Research Affairs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Christopher Andrews</td>
<td>Lawrence Hookey</td>
<td>Kevin Waschke</td>
<td>Paul Moayyedi</td>
<td>Bruce Vallance</td>
</tr>
</tbody>
</table>
**ADMINISTRATIVE AFFAIRS**

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

<table>
<thead>
<tr>
<th>Membership/Admissions</th>
<th>Diversity &amp; Equity</th>
<th>Ethics</th>
<th>Publications/Archives</th>
</tr>
</thead>
<tbody>
<tr>
<td>encourages membership and reviews/approves applications for membership from qualified professionals.</td>
<td>identifies important issues related to equity and visible minorities for discussion and action.</td>
<td>establishes/updates guidelines for ethical standards in patient care, research, education, and industry interaction, and increases understanding of biomedical ethics in gastroenterology.</td>
<td>is responsible for all the CAG publications/communications including the website and advising the journal editor, and oversees the archives.</td>
</tr>
</tbody>
</table>

Louis Liu, Chair
Melanie Beaton, Chair
Louis-Charles Rioux, Chair
Jerry McGrath, Chair
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 Chairs enhance the CAG’s ability to respond quickly to the concerns of practitioners, such as lobbying governmental agencies as well as development of Clinical Practice Guidelines.

Lawrence Hookey, VP

<table>
<thead>
<tr>
<th>Endoscopy</th>
<th>Pediatrics</th>
<th>Practice Affairs</th>
<th>Regional Representation</th>
</tr>
</thead>
<tbody>
<tr>
<td>represents the CAG on matters relating to endoscopy and promotes competence and training in the field, including development of credentialing guidelines in endoscopic procedures.</td>
<td>represents the interests of pediatric gastroenterologists and researchers.</td>
<td>provides a forum to address issues relevant to clinical members of the CAG including ongoing training, knowledge dissemination, practice-related issues and Clinical Practice Guidelines.</td>
<td>serves as a channel of communication between the CAG and provincial/regional gastroenterology associations.</td>
</tr>
</tbody>
</table>

Steven Heitman, Chair  David Mack, Chair  Grigoris Leontiadis, Chair  Mark MacMillan, Chair
EDUCATION AFFAIRS

Professional education has long remained a priority and strength of the 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.

<table>
<thead>
<tr>
<th>Kevin Waschke, VP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gastroenterology Residents-in-Training (GRIT) Course</strong> is a high-caliber, internationally-recognized, annual training program for gastroenterology/hepatology residents held in association with CDDW™.</td>
</tr>
<tr>
<td><strong>Lecture Series</strong> is a monthly national videoconference for gastroenterology residents with presentations from national and international experts.</td>
</tr>
<tr>
<td><strong>Maintenance of Certification (MOC)</strong> reviews and approves submissions for Section One and Section Three RCPSC accreditation of educational events.</td>
</tr>
<tr>
<td>Robert Berger, Co-Chair Geoff Williams, Co-Chair</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Directors</th>
</tr>
</thead>
<tbody>
<tr>
<td>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.</td>
</tr>
<tr>
<td>Winnie Wong, Chair</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Scholars' Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>is an annual course preceding CDDW™ that encourages medical students and internal medicine residents to consider a career in gastroenterology.</td>
</tr>
<tr>
<td>Herbert Brill, Co-Chair Steve Gruchy, Co-Chair</td>
</tr>
</tbody>
</table>
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 the CAG restructured to make Quality Affairs its own division of Operations.

Paul Moayyedi, VP

<table>
<thead>
<tr>
<th>Innovation</th>
<th>Quality Practice Guidelines</th>
<th>Reporting</th>
<th>Skills Enhancement</th>
</tr>
</thead>
<tbody>
<tr>
<td>evaluates how best to develop quality metrics and assess how effective they are at improving quality.</td>
<td>develops quality guidelines relevant to endoscopic and clinical practice. Currently Quality Practice Guideline encompasses the two areas of endoscopy and inflammatory bowel disease.</td>
<td>makes recommendations for content and standards related to point-of-care medical record systems that incorporate quality measures developed by Quality Affairs.</td>
<td>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.</td>
</tr>
</tbody>
</table>

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 sixteen, chaired by VP, Bruce Vallance, 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.

<table>
<thead>
<tr>
<th>Bruce Vallance, VP</th>
</tr>
</thead>
<tbody>
<tr>
<td>RESEARCH AFFAIRS</td>
</tr>
</tbody>
</table>

CAG/CIHR/Industry Partner Research Program is the pride of the CAG. Partners and CIHR provide 1-5 years of funding to junior clinicians and PhD scientists. The 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. The CAG appreciates the support from Crohn’s & Colitis Canada, Ontario Association of Gastroenterology, and Shire for these award programs.

Research Topics in GI Disease Meeting is an annual meeting held before CDDW™, where basic science and clinical trainees come together to present their research and network.

Premysl Bercik, Chair Carla Coffin, Co-Chair
NOMINATIONS COMMITTEE

The Nominations Committee delivers a properly screened slate, as required, of potential Board members, VP Chairs of the Operations Committee, subcommittee Chairs and members according to Board determined criteria for membership by no later than the first Board meeting of each fiscal year.

Carlo Fallone, Chair

NEW

SEE™ Program
Hands-On Polypectomy Courses

The Montréal and Ottawa courses are currently full. Watch for additional courses in 2018!
IN NUMBERS

1170 attendees in total including 250 trainees

343 abstracts

175 speakers

90 hours of Section One accredited learning
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, and strategic planning and fundraising. National office responsibilities may roughly be divided into six broad categories.

Financial
Committees
Gastroenterology Resources/Advocacy
Research
Sponsorship
CDDW™/Education

Annual Conference
For CDDW™ 2017, over 330 accepted abstracts were sorted and laid out for the final program, and office staff liaised with the approximately 175 speakers and co-chairs to solidify the program which offered 90 hours of Section One accredited learning and up to 25.25 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 2017, six fellowships, sixteen summer studentships, and four resident research awards were awarded. The Executive Director liaises with government agencies such as CIHR and our research sponsors, and oversees the 30+ 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 2017, fourteen partners (acknowledged on the final page of this report), including seven BENEFACCTOR sponsors, have provided support to the CAG.

Gastroenterology Resources/Advocacy
The office coordinates activities related to the CAG’s digestive healthcare initiatives, which in 2016-2017 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 30 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 2016/2017 financial period.

It is with warm wishes that the CAG announces the retirement of Sandra Kinnear (née Daniels) on June 30th 2017. For the past 16 years, Sandra has been a key driver in shaping the future of the Association working closely with many Board and Committee members during her time with the CAG, providing the voice of calm and reason. She contributed to most all aspects of the Association over the years. Two very significant achievements include the development and orchestration of a well-developed CDDW™ planning process and the implementation of the CAG Global Rating Scale (C-GRS©) quality program for endoscopy, now in use by over 180 endoscopy units national wide! Sandra will most certainly be missed. We thank her for 16 years of commitment to the development and advancement of the CAG.
Thank you to our Corporate Sponsors

BENEFACTORS

abbvie  
Janssen  
OLYMPUS  
PENOPHARM

PENTAX  
MEDICAL

Pfizer  
Takeda

PARTNERS

Allergan  
Intercept  
Medtronic

P&G  
Shire  
Vantage

www.cag-acg.org