Canadian Association of Gastroenterology 2004 Strategic Plan

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Presented below is the Canadian Association of Gastroenterology (CAG) five year Strategic Plan for July 2004 to June 2009. The Strategic Plan represents an extension of the organization's original 1993 Strategic Plan (1), and directly reflects input from the membership provided via a Strategic Planning Needs Analysis undertaken in the fall of 2002 (2).

The plan outlines strategic priorities established by the CAG Governing Board in October 2003. The Governing Board received input from the Past Presidents Advisory Council, which met in August 2003 to review and consider the results of the needs analysis. The meeting, chaired by Richard Fedorak, included the largest gathering in history of Presidents of the CAG, including Drs Joseph Connon, Aubrey Groll, Richard Hunt, Desmond Leddin, Gary Levy, Eldon Shaffer, Philip Sherman, Alan Thomson, John Wallace and Noel Williams.

This Strategic Plan is designed to guide the CAG as it builds on a forty-year history as the major voice in digestive health, education, research, and the practice of gastroenterology in Canada. The Strategic Plan is structured into five principal initiatives. Each initiative is then considered in further detail by providing more specific goals and targets.

PRINCIPAL INITIATIVES

1. Emphasize the development of the next generation of gastroenterology clinical practitioners, researchers, educators, and leaders.
2. Develop and support sustained local, provincial, and federal governmental affairs and advocacy programs.
3. Promote and enhance professional alliances and vibrant provincial partnerships.
4. Support and enhance the scope of clinical practice, and educational and research programs.
5. Grow resources to provide additional and enhanced services to members of the CAG.

Principal initiative #1: Emphasize the development of the next generation of gastroenterology clinical practitioners, researchers, educators and leaders.

Goals and targets:

1. Define the workforce needs and propose adjustments in training programs accordingly.
 - a. establish a repository of data on gastroenterology workforce needs for basic and clinical researchers, educators and practitioners.
2. Expand membership.
 - a. encourage more minorities and allied health professionals to participate in the CAG.
3. Attract, train, and retain the best and brightest to gastroenterology.
 - a. establish leadership skill development programs.
 - b. establish teaching skill development programs.
 - c. facilitate early transition into CAG management.
4. Expand career opportunities in gastroenterology practice, education, and research — particularly in areas in which the database of gastroenterology workforce indicates a specific need.
5. Promote, with appropriate partners, the curriculum, standards and certification for gastroenterology training for students, residents, fellows, and postgraduate and allied health professionals.
 - a. revise and implement core curricula to ensure quality training and competency.

Principal initiative #2: Develop and support sustained local, provincial and federal governmental affairs and advocacy programs.

Goals and targets

1. Establish the CAG as the pre-eminent advocacy group for digestive health.
 - a. develop alliances to achieve advocacy.

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- b. support advocacy in all levels of government and in nongovernmental avenues.
 - c. develop and implement a public relations initiative.
- 2. Establish a public policy committee to identify, assess and report on digestive disorders and their impact on major policy trends.
 - a. promote proactive and responsive policy development.
- 3. Advocate public and governmental policy to support a skilled gastroenterology workforce.
 - a. establish a comprehensive person-power policy to identify needs in research, education and clinical practice.
- 4. Promote and facilitate implementation of digestive health priorities for Canadians.
 - a. create and promote a national strategy to address digestive health and disease at local, provincial and national levels.

Principal initiative #3: Promote and enhance professional alliances and vibrant provincial partnerships.

Goals and targets

- 1. Facilitate the development of regional associations and professional alliances, where appropriate.
 - a. establish an effective administrative process that will provide input of regional associations and professional alliances to the CAG Governing Board.
 - b. define roles and boundaries of provincial and national organizations.
- 2. Enhance the value of the CAG to regional and national associations.
 - a. facilitate co-sponsorship of regional educational activities.
 - b. optimize two-way communications between the CAG and regional associations.
- 3. Develop and make available a national resource for the acquisition and storage of data related to:
 - a. workforce needs.
 - b. reimbursement issues.
 - c. research needs and outcomes.
 - d. digestive diseases.
 - e. endoscopy and procedural matters.

Principal initiative #4: Support and enhance the scope of clinical practice, educational and research programs.

Goals and targets

- 1. Enhance the CAG as a leading provider of education and basic and clinical research in digestive disease and health through:
 - a. Canadian Digestive Disease Week (CDDW).
 - b. *Canadian Journal of Gastroenterology*.
 - c. regional meetings.
 - d. creation and dissemination of practice guidelines and technical reviews.
 - e. other emerging opportunities.

- 2. Develop publications, curricula, and computer-based technologies for educational programs, research endeavours and clinical practice.
 - a. Create relevant, timely, and user-friendly curriculum tools and educational programs.
- 3. Assist members of the CAG to access and participate in clinical trials and databases.
 - a. Develop a clinical trials database as part of a comprehensive program to support clinical trial and quality improvement activities.

Principal initiative #5: Grow resources to provide additional and enhanced services to members of the CAG.

Goals and targets

- 1. Secure endowments for research and training awards.
 - a. identify and select new ventures to expand CAG research and training funds.
 - b. leverage existing resources through strategic alliances and coalitions.
- 2. Develop a national campaign to increase funding and find new funding resources through partnerships with:
 - a. government.
 - b. CIHR (Canadian Institutes of Health Research)
 - c. Industry
 - d. CDHF (Canadian Digestive Health Foundation)
- 3. Continue to operate the CAG in accordance with sound business, ethical, and financial principles.

We anticipate that this Strategic Plan will serve as a useful template for the CAG and its leadership in guiding the organization forward over the next five years. The continued growth and success of the CAG will provide a yardstick by which to measure the merits of focusing the talents, energy, and resources of the CAG on the five Principal Initiatives considered above in the 2004 Strategic Plan.

Your input and support is highly anticipated and most welcome. Potential methods by which this could be accomplished include discussion amongst regional groups with a summary provided to the CAG National Office (e-mail cagoffice@cag-acg.org), direct communication with any member of the CAG Governing Board, and discussion at the annual general business meeting (held at the CDDW). If there is an interest expressed by members, we will also arrange for a series of focus group sessions to be conducted.

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REFERENCES

- 1. Fedorak R, Sherman P. The 1993 Canadian Association of Gastroenterology Strategic Plan: Excellence in Achievement. *Can J Gastroenterol* 2003;17:683-4.
 - 2. Sherman PM, Daniels SM, Fedorak RN. Summary of the 2002 CAG Strategic Planning Survey. *Can J Gastroenterol* 2004;18:55-6.
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