The annual survey of the Canadian Association of Gastroenterology (CAG) members' educational needs was conducted via keypad assessment during Canadian Digestive Diseases Week (CDDW) 2006, and also in a more detailed paper and on-line survey during March and April 2006. Up to 156 members completed the abbreviated keypad questions and 345 members answered the detailed survey. Similar to previous years, inflammatory bowel disease (IBD) topics were most in demand for future educational events. Other highly rated areas were pharmacological therapeutics, nutrition, autoimmune and metabolic liver disease, and celiac disease. Educational materials were judged to be the most valuable component of the exhibit areas (76%), and 32% reported repeated use of the on-line CAG Interactive Lecture Series.

The purpose of the CAG needs assessment was to provide guidance to the Executive and the CAG Education Committee on areas of greatest educational need. Conducting a needs assessment is a requirement for accreditation of educational events according to the Royal College of Physicians and Surgeons of Canada accreditation criteria.

METHODS
The Education Committee consists of Drs Janice Barkey, Maria Cino, Jamie Gregor, John Fardy, Dana Farina, Marty Fishman, Nicola Jones, Gabor Kandel, Remo Fanacccione, Craig Render, Jeffrey Stal, Connie Switzer, Kevin Waschke, Kelly Burak and Dr Clarence Wong. A subgroup of the committee designed the needs assessment survey which was based on that used in 2005. However, several related areas within the 2005 survey were combined to allow two popular topics – IBD and endoscopy – to be further divided into specific subcategories.

Keypad assessment
Nine topics anticipated to be popular with CDDW delegates were chosen as options for the keypad questions. Questions were posed in three plenary sessions: the Postgraduate Course on February 24, 2006, the Access to Digestive Health Symposium – Part I on February 25, 2006 and the Guidelines Symposium on February 27, 2006. Delegates were presented with nine potential educational topics and were asked to select the topic that they would most like to see as the focus for future educational events. From the same list, delegates were then asked to select the second most important topic.

RESULTS
Keypad findings
Sixty-one delegates completed the needs assessment at the Postgraduate Course, 74 to 76 at the Access to Digestive Health Symposium – Part I and 19 at the Guidelines Symposium. Responses from all sessions were combined for a sample size of 135 to 156 members. However, some of the same delegates presumably attended more than one event and thus answered the questions a second or third time. Results in Figure 1 showed that the most desired topics for educational events were ‘Endoscopy: new techniques’ (26%), followed by ‘Nutrition’ (21%).
CAG News

Paper and on-line survey findings

A total of 51 paper surveys were completed. Initially, the response to a generic e-mail request that was sent to CAG members to complete the on-line survey was poorly received; however, a personalized e-mail request was highly successful, generating another 294 responses. Thus, the total number of individuals completing the survey (paper or on-line) was 345 – the highest response rate on record representing 38% of the solicited membership.

Demographics:

Of the respondents, 98% were CAG members and 71% were men. Regarding education, 69% were MDs, 6% were MD/PhDs, 16% were PhDs and 9% held another degree. The majority of respondents were predominantly hospital-based (63%) rather than community-based (21%), although 16% left this question blank.

Most of the replies were from members in Ontario (41%), followed by Alberta (20%), Quebec (12%) and British Columbia (10%), with responses distributed roughly in proportion to provincial population.

Examining respondents’ primary specialty, 45% were gastroenterologists, 4% were hepatologists, 7% were in pediatrics, 3% were surgeons and 1% were pathologists. Basic and clinical scientists made up 19% and 2%, respectively, of respondents. Residents accounted for 11%, and ‘other’ roles for 8%.

Regarding where respondents spend their time, 65% identified clinical practice as their primary focus, and 28% noted basic research. Administration and teaching accounted for 1% each, with 4% reporting ‘other’ duties (1% left the question unanswered).

Educational topics: The mean interest scores for the 36 scientific educational topics are shown in Figures 2, 3, 4 and 5.

Figure 1) Canadian Digestive Diseases Week 2006 keypad needs assessment findings related to nine potential educational topics. CD Crohn’s disease; UC Ulcerative colitis; UGI Upper gastrointestinal

Figure 2) Scientific educational topics with a score of 5.0 or higher on mean interest score. CD Crohn’s disease; IBD Inflammatory bowel disease; Tx Treatment; UC Ulcerative colitis

Figure 3) Scientific educational topics scoring 4.4 to 4.9 on mean interest score. CD Crohn’s disease; GI Gastrointestinal

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As in previous years, IBD topics received the highest ratings – Crohn’s disease (CD): therapeutics (5.5), ulcerative colitis (UC): therapeutics (5.5), CD: treatment of complications and fistulas (5.4), CD: pathogenesis, genetics and etiology (5.2), UC: pathogenesis, genetics and etiology (5.2), IBD: extraintestinal manifestations (5.1), UC: cancer prevention and surveillance (5.1), and CD: imaging modalities (4.9). Pharmacological therapeutics were also in demand (5.0). In keeping with keypad findings, nutrition was highly scored (4.8), being the third highest interest area after IBD subcategories and pharmacological therapeutics. This is a new development; in previous years, nutrition has only scored between 3.5 and 3.6. Also in demand were autoimmune and liver disease (4.6), celiac disease (4.6), pancreatitis and pancreatic disease (4.5), gastrointestinal oncology (4.5) and various endoscopy-related topics (4.4 to 4.5). Most items received somewhat higher scores than in previous years, presumably related to the greater number of respondents.

Responses for nonscientific educational event topics are given in Figure 6. The highest scores of 4.4 for ‘Teaching theory and techniques’ and ‘Gastroenterology and the Internet’, were still lower than the top-scored scientific topics.

Interactive lecture series: Thirty-two per cent of respondents reported accessing the lectures series repeatedly, 14% had used it once, 50% had never used the e-library and 4% left this question blank (Figure 7).

Exhibits: Responses to the question “Which of the following would be most valuable to you in an exhibit area?” are shown in Figure 8. Respondents were allowed to select more than one item; thus, percentages do not add up to 100%. The overwhelming favourite selected by 76%, was ‘Educational materials’, with ‘Interactive learning’ (51%) a distant second.

DISCUSSION
This year’s needs assessment saw the highest response rate on record. Approximately 38% of the solicited membership participated in the full survey, in comparison with 24% (187), 7% (68) and 29% (255) in 2003, 2004 and 2005, respectively. Although the initial response was poor, members are to be commended for enthusiastically
answering a second personalized request for input. Use of keypads within CDDW to determine educational needs was piloted in 2006. Although the real-time provision of data is attractive, the system is limited to assessing only nine topics (keypad numbers one to nine) at a time.

IBD remains the highest priority of respondents despite yearly CDDW sessions in this area since 2002. Expansion of IBD into specific topics related to CD and UC did not identify one particular area of need; all subcategories were very highly rated. Apart from IBD, pharmacological therapeutics, celiac disease, pancreatitis and pancreatic disease, and endoscopy-related topics were also popular as in previous years. Of interest from this year’s survey is the increased demand for information on nutrition, and autoimmune and metabolic liver disease. These findings, along with evaluations of CDDW 2006 have formed the basis of the 2007 CDDW program.