



Canadian Association
of Gastroenterology

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The Survey of Access to GastroEnterology (SAGE) Program: Advocacy needs facts not anecdotes

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In partnership with provincial gastroenterology societies, the Canadian Association of Gastroenterology (CAG) plans to update the national dataset of wait times for access to digestive disease consultation and endoscopy.

The new program is called the Survey of Access to GastroEnterology (SAGE).

A sage is a person of gravity and wisdom. This seems appropriate because results from the 2005 survey of wait times were certainly grave and, undoubtedly, wisdom is needed to improve health care access.

The 2005 Practice Audit in Gastroenterology (PAGE) Wait Times program (1) showed that only a minority of patients was seen within the target or benchmark times established by a consensus group (2). Those data allowed the CAG to lobby nationally, and the provincial societies to lobby regionally, for the resources needed to correct the problem.

The PAGE data are now three years old and an updated view of wait times is essential. Data are needed to advocate for patients by presenting facts, not anecdotes, to the health care administration at both a government and hospital level.

Is this situation still grave? We do not know for sure, but we do know that

the Canadian physician human resource situation continues to be a concern. According to the Canadian Institute for Health Information, Canada has the lowest number of physicians per hundred thousand population of any developed country, with the exception of Japan (3). In addition, the aging baby boomer population has implications for gastroenterology consultations, which we know increase in frequency

with patient age. We can therefore anticipate that demands for gastroenterology services will increase at a time when physician human resources are limited, calling into question our ability to meet patients' needs.

We invite all clinical gastroenterologists, and internists who see gastroenterology patients, to participate in SAGE. The survey itself is extremely straightforward. Clinicians will be asked to provide data on five new clinic patients and five new patients undergoing endoscopic or other procedures. We only require the patient's age bracket, the date of and reason for referral, and the date of the procedure and/or consultation. No patient identifiers are collected and SAGE can be completed online or on paper. It is as simple as that.

If a large number of clinicians participate, we will

What is SAGE?

SAGE is a short survey that will provide a snapshot of how long Canadians wait for digestive and liver disease consultation and procedures.

What is involved?

Specialists will record four to five data points on at least five new consecutive clinic patients (consults) and five new consecutive procedure patients (less than 1 minute per patient entry).

Who should participate?

Gastroenterologists and internists specializing in gastroenterology, provided they record the date that patients are first referred.

When is SAGE?

SAGE week is November 17 to 21; the alternate week for SAGE completion is November 24 to 28.

Where do I get more details?

Visit the CAG Web site to read more about SAGE and try the demo online survey. You may also print an information package on SAGE to share with colleagues at:

www.cag-acg.org/about/special-projects/sageprogram.aspx

How do I sign up?

Contact the CAG National Office to specify whether you prefer to complete the survey online (preferred) or on paper. You will be e-mailed the URL to the final survey or the paper form (as preferred) before November 17.

E-mail: SAGE@cag-acg.org

Toll-free: 1-888-780-0007

Fax: 905-829-0242

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have an extremely powerful dataset. Regional results can be provided to provincial gastroenterology societies to enable them to advocate for resources in their region. National findings will form the basis of the CAG's efforts to continue to lobby the federal government to increase the profile of gastroenterology and resources for patients.

We hope that you will plan to take part in SAGE this November. Your data are crucial and will ultimately allow us to advocate for better care for your patients.

REFERENCES

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