



CANADIAN ASSOCIATION OF
General Surgeons



2021

Annual Report



Working together to empower general surgeons to improve patients' lives through advocacy, education, and research.

Contents

Message from the President and CEO	3
Strategic Plan	4
Performance Indicators	5
Major Initiatives	6
Accomplishments by Committees	13
Governance Framework	17
Awards and Grants	18
Financial Report	19



Message from the President and CEO

The past year has been extraordinarily challenging. A year of immense strain on the healthcare system, a year that limited our ability to care for patients in a timely manner and to interface with general surgeon colleagues face-to-face.

CAGS had to pivot from an in-person annual conference to virtual. We provided members with options to help meet their educational and networking needs despite being separated across thousands of miles. We were able to connect through webinars, virtual patient cases, mentorship programs and virtual meetings. We advocated for effective workforce transitions for general surgeons and for those in rural and remote areas, a solution to licensing inefficiencies. We supported residents in their preparation for certification exams. Of course, we anxiously waited for the next opportunity to meet again in person, at the [Canadian Surgery Forum](#). It is surprising how much we accomplished during trying times. We hope you will take the time to review some of the exciting new initiatives launched in 2021 and a sampling of things to come.



MARK J WALSH, MS, MD, FRCSC, FACS
PRESIDENT



SHELLEY PELKEY, FCPA, FCMA
CHIEF EXECUTIVE OFFICER



Strategic Plan

Mission

Working together to empower general surgeons to improve patients' lives through advocacy, education, and research.

Vision

Excellence in Surgical Care for All

Pillars



EDUCATION

Education Portal
Masterclasses
Mentoring
Expanded Annual Conference



RESEARCH

Research Grants
Named Research Lectureship
Resident Research Retreat



ADVOCACY

Improved Workforce Planning
National Locum Registry
Rural Surgical Networks

Imperatives



RELEVANCE

Member Value Proposition
Member Growth
Career Resource



CAPACITY

Revenue Diversification
Fundraising Strategy
Resilience



DIVERSITY

Equity, Diversity and Inclusion Advisors
Leadership EDI
Informed Indigenous Partnership



Performance Indicators

↑ 16%
member growth



Gender-balanced leadership team



90
MOC credits offered



of virtual education delivered

88



job postings



Major Initiatives

EDUCATION

Virtual CSF

Pivoting to virtual was necessitated by the pandemic and the *Canadian Surgery Forum* was no exception. The program was designed to optimize the delegate experience online and as a result, there were fewer competing sessions and the conference concluded Friday instead of Saturday, however it continued to offer world renowned speakers and strategic networking opportunities. It provided the opportunity to engage a broader audience of surgical professionals, reach more surgeons in remote areas of practice, reduce the environmental impact and keep everyone safe including patients. **Registrations were higher than expected at 667.**

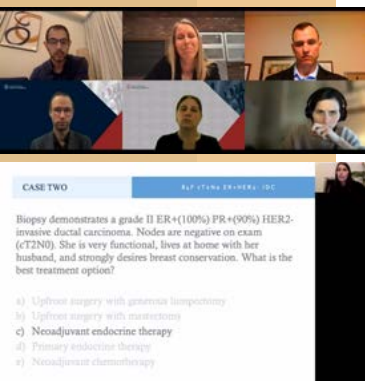
Webinars >

CAGS has been hosting regular accredited live webinars on clinical and non-clinical topics since the pandemic began, available to members live or afterward in the video library. In 2021, CAGS partnered with several other organizations to expand the range of 16 topics including those with Evidence-Based Reviews in Surgery (EBRS), the Canadian Hernia Society (CHS), the Canadian Society of Surgical Oncology (CSSO) and the Canadian Society of Breast Imaging (CSBI). **Up to 200+ members joined us on Thursday nights** to take advantage of these virtual education sessions. They are available for viewing in the video library, within the [Member Portal](#).

The CAGS Exam Review Webinar Series hosts five sessions covering major topics from the Royal College Exam including: Trauma/ACS, Surgical Oncology, Hepatobiliary, Colorectal and Hernia/Foregut. **Between 120 and 150 residents tuned in to these sessions**, saying they found exceptional value as exam preparation.

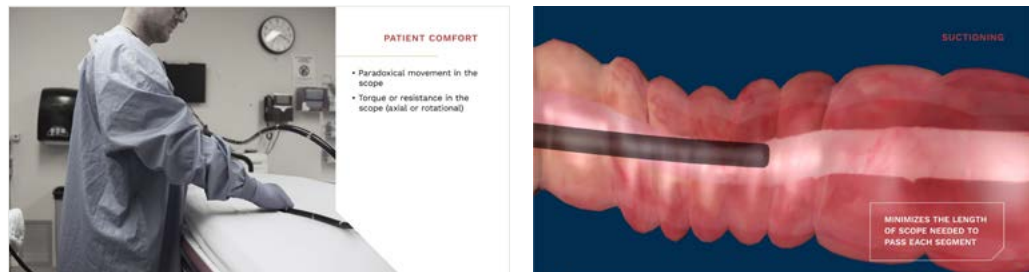
Virtual Patient Cases >

Virtual patient cases are online scenarios that represent authentic, simulated representations of clinical encounters. They provide a powerful, immersive and engaging learning experience that focuses on decision-making and case-management. These in turn can result in diverse outcomes. In 2021, **8 accredited (MoC Section 3) virtual patient cases were available free of charge to members.**



Basic Endoscopy Skills Training Video ▶

Given the hands-on nature of available endoscopy skills training, CAGS faced a bottleneck in the access to hands on courses for surgeon endoscopists, due to limited spots, challenges posed by hospital privileges, interprovincial licensing, and travel restrictions. These limitations are addressed through virtual learning. In this video, CG animations present the colon and the scope within it, to help in understanding how these concepts affect scope advancement. The video explores the impact of scope torque, patient rotation and loop formation on advancement of the scope, promoting improved and safe colonoscopy technique and a better understanding of how to utilize scope guidance technology such as ScopeGuide in clinical practice. The video can be viewed from anywhere, ensuring effective knowledge transfer and a much greater adoption of the techniques, with the ultimate goal of improved patient outcomes. **The video has been viewed over 350 times.**



Operative Delivery and Maternal Care Program ▶

A new program was developed in 2021 to respond to the need to provide maternity care close to home. Addressing this quality-of-life issue for women and their families is crucial to maintaining vibrant communities and culturally supportive local health care services. General Surgeons have the operative competencies to acquire the necessary procedural skills to support safe operative delivery and maternal care in rural communities. The Operative Delivery and Maternal Care Program was developed to increase competency-based training opportunities for practicing General Surgeons to gain these skills, in addition to providing Continuing Professional Development for practicing General Surgeons who participate in maternity care programs.

The program incorporates a didactic webinar series, a live sim-based session and an approved case log of related procedures. Eligible surgeons can choose to take the Course Component as a standalone post-graduate course or can complete all three components to receive a Certificate of Recognition. The program was launched as part of the Virtual CSF in September and continued with webinars in the Fall, **attended by a cohort of over 30 participants.**





Resident-Focused Exam Preparation ▶

The **CAGS Examination** is a formative assessment tool for residents and program directors that can be used to modify teaching and learning activities throughout residency. The goals of the exam are to improve learning processes, provide specific feedback to residents and program directors, facilitate modification of learning activities and clinical experiences with a focus on identified clinical deficiencies, identify or remediate group or individual learners, move the focus away from achieving passing grades to improving specific learning processes, improve residents' metacognitive awareness of how they learn and permit ongoing assessment for fine-tuning of instruction and resident focus on progress. **In 2021, 480 residents completed the exam.**

The **CAGS Exam Review Webinar Series** brings together subject-matter experts over 5 two-hour webinars to offer an interactive review of a selection of exam questions. **The series averages over 1600 live or recorded views each year.**

Accredited CPD Provider ▶

In November, the *Royal College of Physicians and Surgeons of Canada's* CPD Accreditation Committee reconfirmed CAGS as an **Accredited CPD Provider**. This status allows CAGS to manage the accreditation of its educational activities internally and to receive applications for accreditation from external associations and provide coaching to these organizations to assist them in meeting national accreditation standards.

This renewal is a lengthy process which requires detailed submissions for each of four domains and within those, 12 categories, such as organizational mission, independence, professional and legal standards, assessing needs, developing learning objectives, developing content, promoting self-learning, external program review, assessing effectiveness and evaluation strategies. In its assessment, the Royal College encouraged CAGS to continue its commitment to innovation and excellence in developing high-quality CME/CPD programs. **The new accreditation period is effective January 1, 2022 and will end December 31, 2029.**





RESEARCH

Operating Grant

The Canadian General Surgery Foundation was founded in the early 1980's to promote research by general surgeons and general surgery residents in both clinical and basic science. In 2021, the Foundation increased the amount of support for research projects by an emerging surgical researcher from \$20,000 to \$40,000 and the funds were awarded to one researcher to enhance its impact. In the fiscal year 2021, CAGS increased its contribution to the Foundation to \$80,000 to support two \$40,000 grants in 2022. As CAGS' capacity is enhanced through member growth and financial support, its profile and impact on improved patient care continues to grow.

49

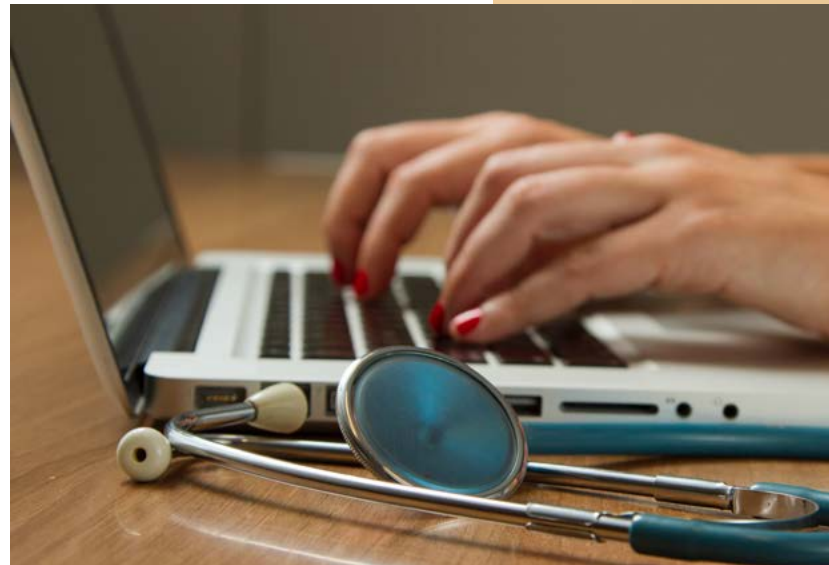
Grants awarded
since 2000

\$80,000

CAGS contribution to the
Foundation to support
two grants in 2022

Resident Research Retreat

Each year, a resident representative from each university program is selected to attend the Resident Research Retreat. In 2021, this event was held virtually and focused on commercializing medical research and developing infographics. An important opportunity to connect with other residents engaged in research, this event is always well-attended.





ADVOCACY

Workforce Planning Task Force

CAGS held a half-day Workforce Summit in 2019 to discuss and develop a plan of action to address issues faced by General Surgeons in the workforce. A Workforce Task Group was assigned by the Board to act on the recommendations from that Summit. The following were developed:

- A job board was developed to promote career opportunities
- A by-weekly job opportunities email is sent to members who subscribe
- Principles and a template for early career planning that should begin in Residency Training
- A statement about transitioning out of practice that is intended to benefit all stakeholders as Senior Surgeons transition out and new graduates transition in
- A statement condemning the practice of new graduates being offered on call activity only.

These tools have been distributed across Canada to Division Chiefs of General Surgery, to Program Directors of General Surgery Residency Training and to Provincial Representatives to CAGS.

National Licensure

Members of the Rural Surgery Committee engaged in advocacy efforts toward national licensure, summarized below.

A detailed argument for national licensure was prepared and a locum pilot was planned in Newfoundland and Labrador, however due to difficulty obtaining a license, this was put on hold. The project did result in a very revealing narrative about the challenges of general surgeons attempting to serve rural and remote areas in short-term locums.

Discussions have been held with a number of national organizations regarding the possibility of establishing a national registry to facilitate licensing across provincial borders and encouraging a coordinated effort on advocacy in this area. In May, the Board, along with ten other associations, endorsed a position statement written by the Society of Rural Physicians of Canada to support National Licensure. In August, the message from the President encouraged member engagement in advocacy. A representative of CAGS reached out to the Indigenous Physicians Association of Canada (IPAC) and the Innu Nation to ensure they were involved. Various politicians and members of the press were contacted and provided with arguments in support of national licensure. Further efforts in 2022 are planned to sustain momentum.



RELEVANCE

[Job Board](#) ▶

CAGS has developed Canada's largest repository dedicated to General Surgeon positions, locums and fellowships. **Eighty-eight job, locum and fellowship postings were promoted in 2021. Each full-time position sees an average of 100 views.** A bi-weekly job opportunities email is also available to members who subscribe, which has a 80-90% open rate.

[Rural Surgery Mentorship Program](#) ▶

The Rural Surgery Mentorship program aims to provide opportunities to grow and support a strong community of engaged current and future rural surgeons, as well as provide professional development for residents through discussion and networking opportunities for possible electives and future employment.

The Program engages practicing Rural Surgeon mentors and General Surgery Resident mentees through quarterly web-based meetings to discuss the rewards, challenges, and training path to a fulfilling career in rural surgery.

[Global Surgery Bursary Program](#) ▶

This program was created to provide support to early-career general surgeons who wish to participate in a global surgery program. Young surgeons, at the peak of their altruism and ability to manage the demands of working abroad, are usually saddled with debt. As such, they may be able to afford a short trip to participate in a global surgery program but not an extended period, as they have interest payments to cover. Offering funds to cover student loan interest might allow more young surgeons the opportunity to get involved in global surgery.

The program allows for grants up to \$10,000 each year to one or more candidates.

[Strategic Plan and Accountability](#) ▶

In 2021, the CAGS Board of Director finalized the key elements of its **Strategic Plan**, formally establishing its **Mission** and **Vision**, its main pillars of support for patient care, namely **Education, Research** and **Advocacy** and agreed on three strategic imperatives namely **Relevance, Capacity** and **Diversity**. This report outlines the many initiatives undertaken in 2021 toward achieving the mission. Efforts to enhance capacity including financial resources and team resilience have been undertaken and will lay the groundwork for success on many fronts. To ensure transparency





and close monitoring of progress, the Board established a **Performance Scorecard** to set targets, track progress over the long-term on the three pillars and three strategic imperatives. It also approved a **Board Workplan** outlining 28 key initiatives that, if completed successfully, will move the dial on the performance measures.

To enhance accountability and professionalism, the Board approved an extensive list of **policy documents** that will guide the work of the Board and committees going forward including policies addressing privacy, copyright, confidentiality and conflict of interest. **Formal terms of reference** were finalized for 15 committees. **There were 36 participants in 2021.**

DIVERSITY

In 2021, CAGS made a concerted effort to improve the diversity of its leadership team and conference speakers.

EDI (Equity, Diversity and Inclusion) Advisors ▶

Six EDI Advisors were appointed to apply an EDI lens to decision-making in six key leadership groups, namely the Board of Directors, Nominating Committee, CPD Committee, Research Committee, CSF Program Committee and Membership Committee.

Analytics

A leadership characteristics matrix was developed to report representation by community general surgeons, women, visible minorities, geography and French-speaking members. This matrix was referred to by the Nominating Committee when selecting its slate of nominees for election by the membership at the AGM. In 2021, **CAGS' leadership team was gender balanced**, but still has progress to make in terms of **minority representation (15% versus 23%)** and **Community Surgeon representation (14.3% versus 57.4% among members)**.

In terms of moderators and speakers, of the 147 speakers at the 2021 virtual CSF, 47 were visible minority (32%, significantly above the average), 49 were women (33%, significantly below balance). The majority of sessions (66%) had visible minority representation and only 6 of 29 multi-speaker sessions (21%) did not have minority representation.

CAGS will continue to monitor and report on diversity in the leadership team and in our educational offerings.

Accomplishments by **Committees**



Information Sessions, Symposiums, Webinars and Training

ACUTE CARE SURGERY (DR. KELLY VOGT)

Delivered first CAGS National Teaching Session with the Program Directors Committee

CPD (DR. CAROLYN NESSIM)

Developed 4 webinars and hosted 7 partner webinars

Developed CAGS Programming at 2021 Virtual CSF

EDI (DR. AHMER KARIMUDDIN)

Delivered webinar for Allyship

Held research symposium on disparities in surgical outcomes in Canada

ENDOSCOPY (DR. JEFF HAWEL)

Produced Basic Endoscopy Skills Training Video

EXAM (DR. PAOLA FATA)

Delivered 5 CAGS Exam Review webinars, 700 attended and

803 post views — Trauma, SurgOnc, HPB, Colorectal, Hernia/Foregut

GLOBAL SURGERY (DR. ANISE BARTON)

Delivered webinar: *So You're Interested in Global Surgery*

MIS (LAPCO) (DR. SEAN CLEARY)

Delivered 'How I Do It' Webinars on Intracorporeal (ICA) Anastomoses

& Laparoscopic Left/Sigmoid Colectomy

NOMINATING (DR. PAOLA FATA)

Completed anti-bias training

POST GRADUATE (DR. MICHAEL OTT)

Launched National Teaching Rounds with first session on Peptic Ulcer Disease

RESEARCH (DR. REBECCA AUER)

Redesigned Residents' Retreat, adapted to a virtual format and removed formal research presentations by residents and replaced with interactive session on creating infographics for research

3. Pay attention & Speak Up

- Monitor your workplace and organizations
- Don't wait for the marginalized to speak up
- Say something at the time if possible, whether minorities are present or not
- If you can't speak up at the time, have a discussion or write a letter later



PATIENT COMFORT

- Paradoxical movement in the scope
- Tongue or resistance in the scope (axial or rotational)



INFORMATION SESSIONS, SYMPOSIUMS, WEBINARS AND TRAINING (CONTINUED)

RESIDENTS (DR. CAROLINE HUYNH, DR. TAMARA GIMON)

Ran two Medical Student Information sessions
Developed a [Medical Student Info Page](#)

Created a “Day in the Life” series to showcase the daily life of general surgery trainees
Developed a new round of “Scrub Caps Off” and “Resident Research” profiles

RURAL SURGERY (DR. PETER MILES)

Developed rural surgery sessions at 2021 CSF
Developed Operative Delivery and Maternal Care Program — 4-part webinar series, clinical component partnership with uOttawa & NOSM and collected expressions of interest in certificate

WOMEN IN SURGERY (DR. LARA WILLIAMS)

Delivered webinar: *Alternative Practice Models in General Surgery: A New Way Forward*
Delivered Embodied Leadership Training



Publications, Studies and Surveys

ACUTE CARE SURGERY (DR. KELLY VOGT)

Completed CAGS-supported COVID in EGS study (submitted to CSF)
Published 4 additional manuscripts from the multicentre research program

CLINICAL PRACTICE (DR. GARY GAMME)

3 PubChat Twitter forum discussions about significant publications in general surgery

CPD (DR. CAROLYN NESSIM)

Conducted Member CPD Needs Survey

EDUCATION (DR. GARY GAMME)

Conducted survey to inform development of Undergraduate General Surgery Curriculum for Canadian medical students

GLOBAL SURGERY (DR. ANISE BARTON)

Compiled and posted a comprehensive listing of Canadian Global Surgery departments on CAGS website

MEMBERSHIP (DR. JULIE TOUSIGNANT)

Conducted Member Services Survey

PROVINCIAL REPS (DR. KEVIN LEFEBVRE)

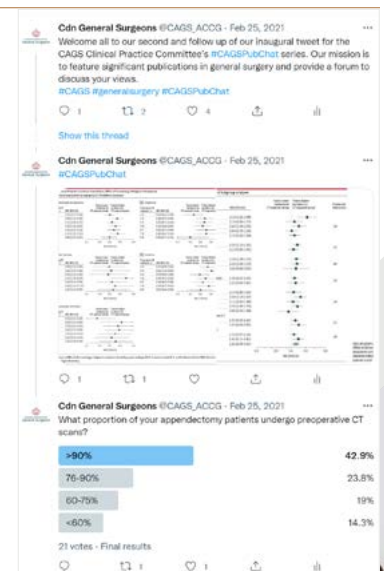
Drafted a proposal for developing Sustainable Community Practice Models

WOMEN IN SURGERY (DR. LARA WILLIAMS)

Surveyed Mentorship Program Participants

WORKFORCE PLANNING (DR. SAM BUGIS)

Published On-call-ogly Statement
Developed a Career Planning Guide





Assessments and Exams

CPD (DR. CAROLYN NESSIM)

Completed Comprehensive CPD Needs Assessment for 2022 CPD planning

EXAM (DR. PAOLA FATA)

Delivered 2021 CAGS Exam – 480 writers

GLOBAL SURGERY (DR. ANISE BARTON)

Renewed MOUs with COSECS and University of Guyana and shared 2019 & 2020 CAGS Exam



Recruitment, Grants and Growth

CPD (DR. CAROLYN NESSIM)

Achieved Royal College Accreditation Renewal for 8 years

EDI (DR. AHMER KARIMUDDIN)

Recruited 6 EDI Advisors

MEMBERSHIP (DR. JULIE TOUSIGNANT)

Achieved 16% membership growth

NOMINATING (DR. PAOLA FATA)

Nominated new Member-at-Large – Community (Dr. Kevin Lefebvre) and CSF Program Chair – 2023 Vancouver (Dr. Ahmer Karimuddin)

PROVINCIAL REPS (DR. KEVIN LEFEBVRE)

Recruited a representative for every province

RESEARCH (DR. REBECCA AUER)

Expanded CAGS Research Committee Membership to 12 members
CAGS Operating Grant – Revamped the review process, scoring and feedback process, reviewed 21 high quality grants and awarded one \$40,000 grant to a New/Emerging Investigator (Dr. Lawrence Lee)

WORKFORCE PLANNING (DR. SAM BUGIS)

Worked toward a coordinated national approach to recruitment

Governance

CPD (DR. CAROLYN NESSIM)

Developed Accreditation of External Activities Policy & Fee Change
Conducted 9 External Accreditation Reviews — 2 co-developed by CAGS

EDI (DR. AHMER KARIMUDDIN)

Developed Characteristics Matrix for CAGS Leadership
Analyzed diversity of 2021 CSF moderators and presenters

NOMINATING (DR. PAOLA FATA)

Incorporated Characteristics Matrix in nominee assessment

RESIDENTS (DR. CAROLINE HUYNH, DR. TAMARA GIMON)

Created a Diversity Committee to concretely address disparities and inequities in
general surgery training

RURAL SURGERY (DR. PETER MILES)

Developed a paper presenting a strong Argument for National Licensure
Held meetings with various partners and the media advocating for National Licensure
Organized three locum pilots centers in Newfoundland, recruited interested members,
and the tested licensure application process
Explored the possibility of a national credential repository
Engaged IPAC (Indigenous Physicians of Canada) and Innu Nation in National
Licensure discussions

STRATEGY AND POLICY

15 committees developed new Terms of Reference:

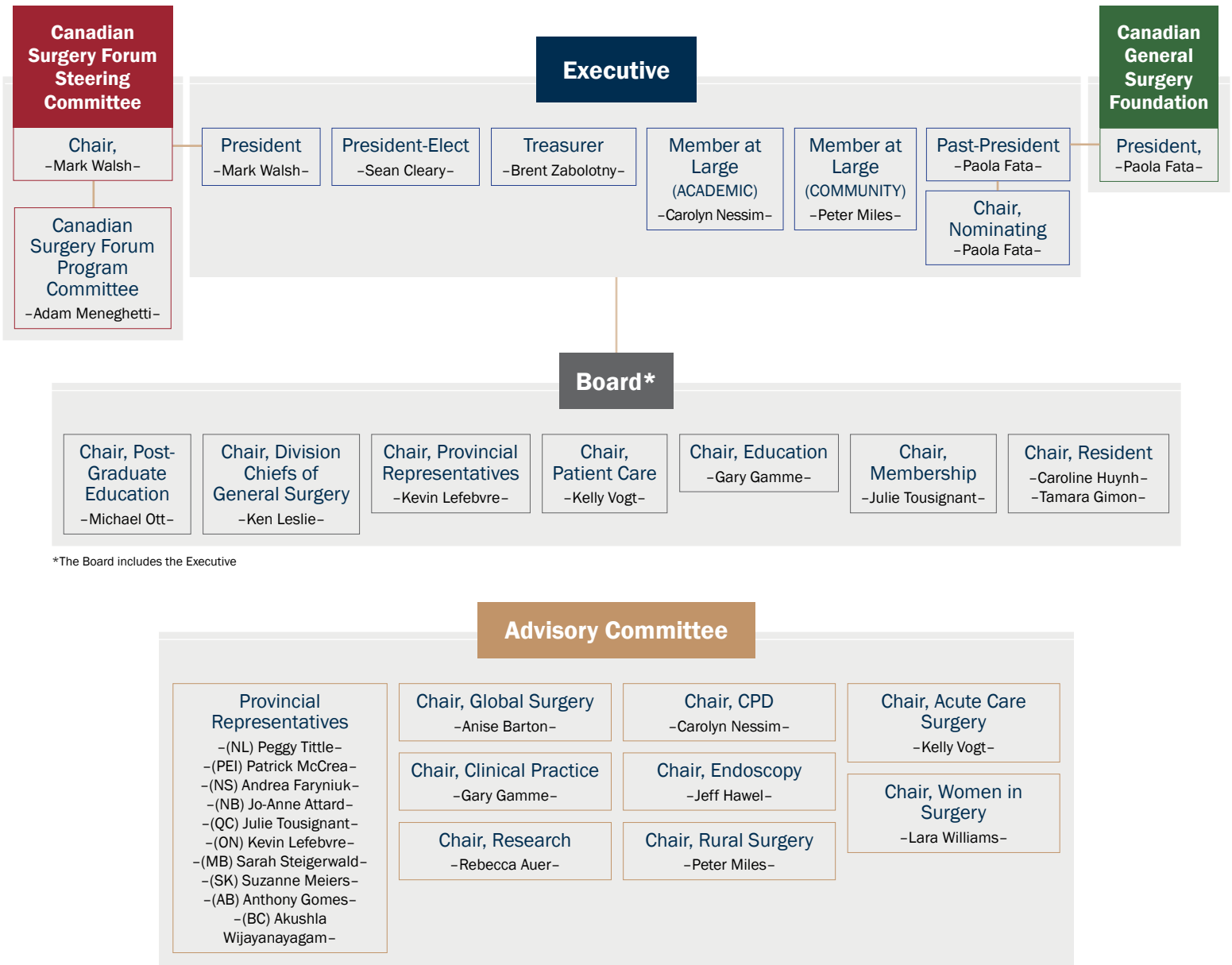
- Acute Care Surgery**, Dr. Kelly Vogt
- Clinical Practice**, Dr. Gary Gamme
- CPD**, Dr. Carolyn Nessim
- CSF Program**, Dr. Jeremy Grushka
- EDI**, Dr. Ahmer Karimuddin
- Executive**, Dr. Mark Walsh
- Global Surgery**, Dr. Anise Barton
- Membership**, Dr. Julie Tousignant
- Nominating**, Dr. Paola Fata
- Post-Graduate**, Dr. Michael Ott
- Provincial Representatives**, Dr. Kevin Lefebvre
- Research**, Dr. Rebecca Auer
- Residents**, Dr. Caroline Huynh,
Dr. Tamara Gimon
- Women in Surgery**, Dr. Lara Williams
- Workforce Planning**, Dr. Sam Bugis

WORKFORCE PLANNING (DR. SAM BUGIS)

Developed a transition out of practice
policy statement — 2-years notice



Governance Framework



*The Board includes the Executive

Working Groups

- Exam Development -Paola Fata-
- Workforce Planning -Sam Bugis-
- MIS (LCS) Task Force -Sean Cleary-
- MIC (Bariatric) Task Group -Adam Meneghetti / Shahzeer Karmali-

Equity, Diversity & Inclusion Advisors

- Board -Ahmer Karimuddin-
- Nominating Committee -Morad Hameed-
- CPD Committee -Lakho Sandu-
- CSF Program Committee -Cagla Eskicioglu-
- Research Committee -Kelly Vogt-
- Membership -Julie Hallet-

Awards and Grants

Operating Grant

The Canadian General Surgery Foundation was established in the early 1980's to promote research by general surgeons and general surgery residents in both clinical and basic science. In 2021, the Foundation awarded a grant of \$40,000 to a research project by an emerging surgical researcher.

Dr. Lawrence Lee, PhD

ERAS 2.0 – A Multicentre Prospective Cohort Study of Same-Day Discharge for Laparoscopic Colectomy



CAGS Teaching Award

Awarded annually to residents from each General Surgery Residency Program in Canada, selection is based on demonstrated teaching excellence. Each program may develop their own criteria by which to make the selection. Programs may consider faculty evaluations of resident teaching, student evaluations of resident teaching and selection by other residents in the program. Congratulations to the 2021 recipients!

- Memorial University** – Dr. Carrie Howard
- Dalhousie University** – Dr. Shawn Brophy
- Sherbrooke University** – Dr. Maude Rancourt
- Laval University** – Dr. Etienne Cardinal
- McGill University** – Dr. Ebram Salama
- University of Montreal** – Dr. Audrey Létourneau
- University of Ottawa** – Dr. Chelsea Towajj
- Queen's University** – Dr. Zuhaib Mir
- University of Toronto** – Dr. John Sawires
- McMaster University** – Dr. Kathleen Logie
- University of Northern Ontario** – Dr. Jordan Crosina
- University of Western Ontario** – Dr. Shareef Alqahtani
- University of Manitoba** – Dr. Lauren Hampton
- University of Saskatchewan** – Dr. Katlin Mallette
- University of Alberta** – Dr. Farah Ladak
- University of Calgary** – Dr. Sidharthe Shinde
- University of British Columbia** – Dr. Vivian Ma



Financial Report

Despite trying times, the leadership of CAGS did their best to keep a tight reign on expenses and to provide services to members that would continue their engagement with CAGS, finishing the year in a strong position with net revenue of \$105,488 and membership growth of 16%.

These exceptional results could only have been achieved because of member loyalty to the association and their desire to engage with virtual education and other opportunities to connect with distant colleagues during the pandemic. In addition to the highly-valued financial support of members, CAGS received financial support from the federal government and from industry partners in 2021, both critical to on-going operations.

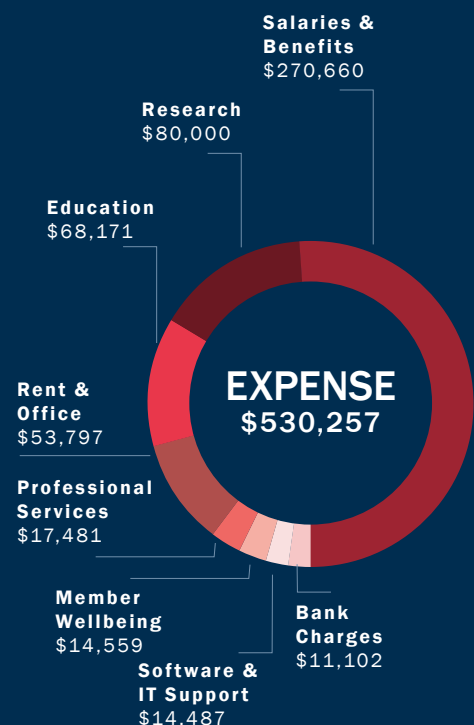
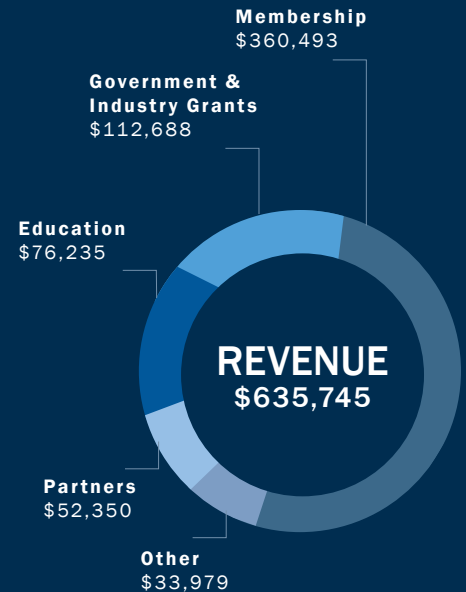
CAGS continued to support general surgery research by contributing \$80,000 to the *Canadian General Surgery Foundation* to fund future research projects undertaken by early career researchers. CAGS also continued its support of Evidence Based Reviews in Surgery (EBRS), the *Canadian Journal of Surgery* and tools to enhance surgeon wellbeing.

The Board of Directors recognizes the need to reinvest residual net assets in strategic initiatives that will increase the relevance of CAGS to members such as enhanced education programs that respond to changing member needs and take advantage of innovations in CPD and delivery platforms. Other examples include efforts to grow the membership, advocate for national licensure, develop tools to assist members to implement sustainable community practice models and support for graduating general surgeon to practice in low and middle-income countries.

CAGS finished 2021 in a strong financial position, ready to invest in the future. Stay tuned for exciting developments in the years to come!



DR. BRENT ZABOLOTNY, MD, FRCSC
CAGS TREASURER





CANADIAN ASSOCIATION OF
General Surgeons

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