ASGE’s Timeless Core Ideology

Core ideology describes an organization’s consistent identity that transcends all changes related to its relevant environment. Core ideology consists of the Mission and Core Values. The Mission describes who we are, what we do and at a very high-level, how we do it. Our Core Values are the enduring principles that guide the behavior of the organization.

MISSION:

To be the global leader in advancing digestive care through education, advocacy and promotion of excellence and innovation in endoscopy.

CORE VALUES:

- Excellence
- Professionalism
- Innovation
- Inclusivity
ASGE’s Envisioned Future
10+ Year Vision

Envisioned future conveys a concrete, yet unrealized vision for the organization. The vivid description of a desired future describes how the world could be different for key stakeholders – it is a clear and compelling narrative that serves as a focal point for effort and describes what the organization seeks to achieve over the next 10+ year planning horizon.

VIVID DESCRIPTION OF A DESIRED FUTURE

ASGE Members
ASGE is the home of gastrointestinal endoscopists for the lifespan of their careers. ASGE members practice high-quality, cost-effective endoscopy.

ASGE plays a key role in developing the endoscopy skills of gastroenterologists so that all GI fellows and practitioners are inspired and motivated to become members. At every stage of their careers, ASGE members access high quality educational offerings. The IT&T Center and GI Leap provide access to training for those wanting to expand and improve their practice or learn about disease-specific GI disorders and treatment.

Endoscopists can easily identify evidence-based, easy to use, clinical practice guidelines to enhance and support best practice decisions. Practicing physicians, fellows, residents, advanced practice providers and medical students utilize and benefit from the individualized education, training, advocacy, mentorship, and GI practice management information delivered by ASGE.

Patients
ASGE offers accurate, comprehensive, and patient-friendly healthcare information on endoscopic procedures and related disease. Because ASGE physicians deliver high quality endoscopic care, patients from all cultural backgrounds seek out ASGE members and ASGE recognized quality endoscopy units. Patient access to high-quality GI care and endoscopy is promptly available to all patients, including colonoscopy screening for colorectal cancer and colonoscopy for positive colorectal cancer screening tests. More patients experience improved GI health because of ASGE advocacy, education, and innovation. ASGE continues to lead innovation in developing new therapeutic techniques.

ASGE as an organization
As the global leader in state-of-the-art gastrointestinal endoscopy education, clinical training, and research, ASGE is a valued ally for endoscopists and an advocate for innovation in diagnosis and treatment of GI diseases. ASGE is the premier organization for cutting edge advances in endoscopic technology, simulation-based medical education, and design and promotion of endoscopic research.
Across the globe, endoscopists and their professional organizations look to ASGE for education in endoscopy performance and guidance in clinical care. ASGE identifies the top research priorities for the field. ASGE promotes society, industry and government funding of endoscopic research.

ASGE is regarded for its welcoming, inclusive culture that values the contributions of a diverse membership. A champion for increased access to endoscopy, ASGE is leading education and research regarding outcomes for underrepresented minorities and ways to reduce healthcare disparities in the gastrointestinal endoscopy space. ASGE has made great strides in promoting gender, racial, and ethnic diversity within the practice of endoscopy and within its leadership. As a result of these initiatives, the composition of the gastrointestinal endoscopy workforce reflects the diversity of the patient population we serve.

Endoscopic Ecosystem
ASGE collaborates with its sister gastroenterology societies to align activities, achieve common goals, and advance the profession. Other gastroenterology societies look to ASGE as the premiere source for endoscopic education and endoscopic practice guidelines. ASGE has the highest member value and international engagement of the gastroenterology societies.

Providing access to gastrointestinal physician thought leaders facilitates education, innovation and research for pharmaceutical companies, device manufacturers, and other industry partners. As a result, donations to the Foundation continue to increase year over year, funding research and customized training programs that support future growth of the specialty.

Payors identify ASGE as the key source of guidelines and recognize the benefits and value of high-quality colonoscopy and polypectomy. Primary care physicians view ASGE as the ultimate source for gastrointestinal cancer screening guidelines, endoscopic guidelines, and endoscopic practice. Referring physicians recognize and payors and regulators preferentially reimburse for the quality and value of care provided in endoscopy departments recognized by ASGE quality programs. Principal regulatory bodies solicit and rely upon ASGE opinions and feedback on issues pertaining to gastrointestinal endoscopy.
Key Drivers of Change

Key drivers of change are powerful forces that necessitate ASGE develop strategies to address. They are conditions and dynamics in the relevant environment that will make tomorrow very different than today.

KEY DRIVERS:

1. The changing regulatory environment and declining reimbursement for endoscopic services.
2. Competition in provision of services from other gastroenterology societies, device/pharma industry, venture capital groups and other entities.
3. Changes to the delivery of medical education (virtual, hybrid, AI based, simulation).
4. The evolving needs of current and future ASGE members based upon practice setting, age, gender, ethnic and racial diversity, international perspectives, and other social influences.
5. Development of disruptive diagnostic technologies with a shift from diagnostic toward therapeutic procedures.
6. Increasing need for an inclusive organizational culture that values diversity in leadership, volunteers and staff creates a sense of belonging for all.
7. Shift of gastroenterology workforce into hospital employee practice models and large regional group practice organizations.
Goals, Objectives & Strategies

Five Year Goals

Goals will serve the organization for the next three to five years. They are outcome-oriented statements that represent what will constitute the organization’s future success. The achievement of each goal will move the ASGE towards the realization of its vision.

Objectives describe what we want to have happen with an issue. What would constitute success in observable or measurable terms? They indicate a direction – increase, expand, decrease, reduce, consolidate, abandon, all, distribute, none. Objectives have a three to five-year timeframe and are reviewed every year by the Board.

Strategies describe how the Society will commit its resources to accomplishing the goal. They bring focus to operational allocation of resources and indicates an activity – redesign, refine, create, identify, revise, develop, improve, enhance, implement, establish. Strategies have a one to three-year timeframe reviewed every year by the Board. Strategies set strategic priorities for committees, staff, and all other work groups.

GOAL A: ASGE AS AN ORGANIZATION

ASGE is the global leader in state-of-the-art, quality endoscopy education, training, research and advocacy with an organizational membership that is as diverse as the patients it serves.

Objectives:
1. Increase recognition of ASGE as the global leader in endoscopy education, training, and research.
2. Increase access to ASGE education, hands-on teaching, materials, and offerings for the entire endoscopy professional team.
3. Expand the reach and impact of ASGE’s advocacy initiatives.
4. Increase federal government, industry and private support for research and education.
5. Increase gender, racial and ethnic diversity in ASGE’s membership and leadership - within a culture of inclusion.
6. Reach and maintain a financial position that secures ASGE programming.

Strategies:
1. Expand our learning and educational platform to international markets, including addition of real-time language interpretation and written translation services for major markets.
2. Enhance our educational offerings and further endoscopic research by increasing support from ASGE industry partners and others, including utilizing IT&T to collaborate with industry partners on innovation.
3. Increase the reach and penetration of ASGE courses by exploring other business models in delivery (e.g., regionalization, partnership with institutions, networks and major group practices).
4. Increase focus on post graduate education for practitioners as new technology and techniques evolve.
5. Develop an advocacy strategy to educate the public and legislative/regulatory bodies on patient issues especially endoscopic health, health equity for underserved communities, and increase access to high quality endoscopic services for all.
6. Improve our outreach to practicing physicians about matters relevant to them on a more regular basis.
7. Identify the demographic indicators within the membership to determine what is of importance to each segment of our membership.
8. Develop a strategy to increase gender, racial and ethnic diversity in ASGE’s membership, leadership, and programming within a culture of inclusion.
9. Identify and recruit new sources of revenue for educational offerings.
10. Seek increased funding for research and development of colorectal cancer from NIH, DOD and other appropriate agencies.

GOAL B: ASGE MEMBERS

ASGE is the home of and advocate for endoscopists and their professional teams for the lifespan of their careers.

Objectives:
1. Enhance identification of offerings appealing to general and advanced endoscopists, as well as to non-endoscopist members of the endoscopy team.
2. Expand resources to implement practice guidelines recommendations.
3. Increase access, flexibility, and availability of mentoring opportunities during training and throughout a member’s career.
4. Increase member recruitment and retention.
5. Increase gender, racial and ethnic diversity in ASGE’s membership and leadership within a culture of inclusion.

Strategies:
1. Develop and expand curricula/pathways for fellows, practicing endoscopists and the healthcare team.
2. Expand ASGE educational offerings into digestive disease management.
3. Develop a robust mentorship network to allow for longer duration hands-on bedside training and assessment in complex procedure pathways.
4. Examine the implications of creating new membership types based on different needs (e.g., private group practice, academic group practice, international, and team-based).
5. Develop initiatives to increase gender, racial and ethnic diversity in ASGE membership.
GOAL C: PATIENTS

ASGE and member endoscopists are patients’ most trusted source of accurate and inclusive gastrointestinal health care information and medical care.

Objectives:
1. Increase consistency, reliability, and accuracy of information given to patients.
2. Increase patients’ trust of ASGE member endoscopists.
3. Increase access to high-quality endoscopic care for all patients.
4. Increase communication to patients regarding ASGE quality care initiatives.
5. Increase commitment to health equity in GI care and the elimination of health disparities.

Strategies:
1. Enhance ASGE visibility and marketing for public awareness in gastroenterology.
2. Partner with patient advocacy organizations, celebrities, and foundations for whom our advocacy interests intersect with theirs.
3. Collaborate with other organizations in responding to unfairly biased public media, and inaccuracies and misinformation in the public sphere.
4. Expand education for patients beyond CRC screening to other GI cancers and conditions.
5. Better comprehension of public needs pertaining to GI Health (information on symptoms, OTC therapies, probiotics, testing, etc.)
6. Expand patient outreach about the value and nature of high-quality endoscopy.
7. Develop new advocacy programs to promote improved access to endoscopic care for groups with low socioeconomic status and for minorities.

GOAL D: ENDOSCOPY ECOSYSTEM

All relevant stakeholders look to ASGE as the premier source for endoscopic training, research and innovation, patient education and best practices.

Objectives:
1. Increase access to regulatory bodies and payors to advocate for ASGE’s goals.
2. Expand the number of ASGE partnerships (e.g., to include PCPs to direct GI care & colon cancer screening).
3. Encourage the adoption of validated endoscopy quality measurement and practice guidelines by payors and other stakeholders.
4. Increase collaboration between ASGE and other GI societies.
5. Broaden partnerships with industry partners to drive innovation and optimize clinical practices.
6. Provide support to GI practices and institutions in navigating the forces driving greater consolidation of services.
7. Leverage Digestive HealthWorks, LLC to assist with multi-society initiatives and to build and reinforce relationships with GI societies through the provision of quality management services.

Strategies:
1. Create mechanisms to support development and adoption of emerging technologies.
2. Enhance education and participation of all stakeholders in health advocacy and practice management.
3. Continue to develop high quality, evidence-based guidelines to enhance payor coverage for emerging diagnostic and therapeutic endoscopic procedures.
4. Engage with industry to address diagnostic and therapeutic gaps in clinical care.
5. Assess and disseminate the core objectives of the Group of Eight.
6. Identify and meet the educational and practice needs of endoscopists in large group practices.
7. Seek new ways for Digestive HealthWorks, LLC, as a for-profit subsidiary, to manage new revenue-generating initiative or collaborations that support ASGE.