



iPAAC
INNOVATIVE PARTNERSHIP
FOR ACTION AGAINST CANCER

Joint Action on network of Comprehensive Cancer Centres JA Crane

Preparatory activities on creation of National Comprehensive Cancer Centres and EU Networking (EU4H-2021-JA-03)

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STRUCTURE OF THE WP AND WP LEADERS

Acronym of the new Joint Action is **CraNE JA**

WORK PACKAGE 5

Proposed title of the WP

The EU Network of comprehensive cancer centers: composition, governance, joining process, and functioning.

WP Leader

Italy (Alleanza contro il cancro/alliance against Cancer, ACC)

WORK PACKAGE 5

- The main objective of this WP is the design of the EU Network of Comprehensive Cancer Centers (CCCs) by defining the composition, coordination, and activities. The formation of the EU Network is regarded as a fundamental step to improve cancer care and avoid the unacceptable disparities currently present across the EU, particularly for timely diagnosis and treatment. The Tasks will define the requirements to access the Network, its structure, governance, functioning, and monitoring. The activities of the Network should guarantee a high standard of care in each CCC through the continuous update of clinical procedures based on the availability of new scientific evidence. Moreover, the Network should promote the collaboration at all possible level among the CCCs while a continuous interaction with EU stakeholders, including citizen and patient organizations, will provide the necessary governance framework to foster cancer care in EU.

WORK PACKAGE 5

Task 1. Creation of the EU Network of CCCs

- Subtask 1.1. Recognition and selection of pre-accredited CCCs through already existing accreditation programs. Definition of the process for accreditation of not already accredited CCCs.
- Subtask 1.2. Definition of continuous monitoring processes and benchmarking in the EU Network of CCCs.

Task 2. Development of a governance model for the EU Network of CCCs for an efficient coordination of its activities: leadership, functional structures, secretariat

- Subtask 2.1. To develop a governance model that allows the harmonic interaction of all CCCs and the efficient coordination of the activities of the Network.
- Subtask 2.2. Definition of role of a permanent secretariat that support the Network for the internal and external activities.

Task 3. Strengthening clinical care and research through networking

- Subtask 3.1 Design of collaboration activities of national CCCs within the European context.
- Subtask 3.2 Identification of processes and resources to enable the EU Network to link with other EU cancer policy initiatives.
- Subtask 3.3 Definition of the processes for ensuring the involvement of stakeholders, citizens and patients in the strategy of the EU Network.

WORK PACKAGE 6

Proposed title of the WP

Organization of comprehensive high quality cancer care in
CCCN's

WP Leader

Germany (Federal Ministry of Health, BMG)

WORK PACKAGE 6

- The proposed WP is a continuation of the theoretical framework of Comprehensive Cancer Care Networks (CCCNs) developed during the Joint Action CanCon and its translation into practice which was successfully achieved in WP 10, “Governance of integrated and comprehensive cancer care” of JA iPAAC. In iPAAC, WP 10 developed practical instruments (e.g., patient pathway development, methodology to derive quality indicators, Set of Standards for CCCN, and a monitoring framework for the implementation of CCCN) to govern oncological care successfully. These instruments were field-tested in two pilot sites and evaluated. The evaluation recommended that the concept is suitable for roll-out to other volunteering members states and highlights that to implement CCCNs successfully, further support and training at the policy and institutional level are necessary.
- Therefore, this new WP sets out to further develop the access and availability of the comprehensive high quality of care in CCCNs to all European member states (MS). And develop tools on how the CCCN approach can be successfully applied and implemented in national health care settings.
- The WP will start by developing a joint concept of the role of CCCN at the national level and how to embed the CCCN concept in national health care settings. The WP sets out to develop support mechanisms and tools to help and enable MS to implement CCCNs.

WORK PACKAGE 6

Specific objectives are

- Define the role of CCCN within the landscape of national governance of oncological care with a focus on the interfaces with Comprehensive Cancer Centre (CCC) and Comprehensive Cancer Network (CCN) (Cooperation with WP CCN and WP CCC)*;
- Develop tools and instruments to enable and empower member states to set up quality assured CCCNs;
- Applying the instruments developed under JA iPAAC to other tumor entities (QI, Set of Standards for lung cancer)
- Further, develop the patient-centeredness with the CCCN approach through patient pathways and patient-reported outcome measures (PROMs) on the example of lung cancer.
- Conducting a feasibility study for the results developed under tasks 2 - 4

WORK PACKAGE 7

Proposed title of the WP

WP Framework to enable COMPREHENSIVE CANCER CENTRES

WP Leader

France (Institut National contre du Cancer, INCa), WPL co-lead
Norway (Oslo University Hospital, OUS)

WORK PACKAGE 7

Objectives:

- The main objective of this WP is to develop a consensus of Comprehensive cancer centers, both standalone centres, and centres which are part of University or General Hospitals. It should be based on scientific evidences and experiences from the Members States.
- The Europe's beating cancer plan identified the NCCCs as a **tool for higher-quality care**. Thus, this approach should be pragmatic and be part of a **continuous quality improvement process**. The definition of the criteria for a NCCC will be based on a **European standard to be developed by the JA**. High focus should be on the integration of translational research and clinical care.
- These criteria should be realistic, reasonable and progressive. Indeed, due to different organisations and levels of integration in the MS, the NCCCs model will be able to allow progressive development and will thus provide the criteria mandatory at different stages of their development. Thus the process will need to be dynamic; initial entry, followed by quality improvement.
- Criteria for eligibility should include overall governance structures; research standards (inputs and outputs), educational and care standards (liaising with WP6 and building on iPAAC) and processes at an institutional level, ensuring quality at tumour group (MDT) level.
- This work package is intended to organize discussions with the main actors who will be concerned by the future development of the network of CCCs: representatives of member states, network of establishments and establishments, European organizations, experts.

WORK PACKAGE 7

Tasks to be considered:

Task 1 : State of the art: Mapping of the potential pre-identified CCC, according the agreed common approach

- Existing models
- Key principles, including how to develop centres towards organizational maturity.

Task 2 : Standards for CCCs + quality improvement

- Defining research standards – how to evaluate the infrastructure and processes for basic, translational and clinical research to finally promote changed clinical practices. Quantification of patient accrual rates could be a key result indicator.
- Defining also standards to encourage innovation (especially in Early Detection and AI) and technology transfer. Assessment of contribution to the international competition in these fields could use bibliometrics in accordance with Open Science standards and value international cooperations.
- Defining research standards on prevention, understood as the characterisation of risk factors, the link between clinics and expositions, but also including the social sciences and the evaluation of populational interventions. These elements should be included in the exchanges between researchers and clinicians in order to promote an evolution of the care system that includes prevention.
- Defining standards for integration between research and care (liaise with WP on care standards). Ensure that there are standards and criteria for personalised medicine including molecular diagnostics, genomics/proteomics and AI, molecular tumour boards and personalised medicine pathways. Also around the multidisciplinary of professionals.
- Defining Education and Training standards for CCCs including inter-speciality MDT/IPU (integrated practice unit) training.

WORK PACKAGE 7

- **Task 3: Governance of the CCCs**, including especially mechanisms for Governance of Cancer Centres which are part of University Hospitals and with agreements with Universities. What standards evaluate the strength of such governance structures and processes? - e.g. Governance Boards and their terms of reference.
- **Task 4: Stakeholder forum** (including networks, CCCS, experts, European organizations). The stakeholder forum is a platform for consultation of key stakeholders including expert groups, international organisations and patient groups at European level in order to consider all the tasks of this workpackage.

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Deliverables to be considered by this workpackage

- Map of the potential pre-identified CCC and potential new CCCs, according the agreed common approach
- An integrated and straightforward set of criteria for CCCs covering all aspects of Governance, Research, Education and Care (liaising with WP6), which enable the creation of a full Network.
- A quality improvement process to progressively ‘raise the bar’.
- Process of selection of NCCCs recognized at EU Level including continuous quality improvement process procedures

WORK PACKAGE 8

Proposed title of the WP

Work Package on Integrated Care Governance and Networks

WP Leader

Spain (Plan Director Oncologico de Cataluna/Instituto Catalan de Oncologia, PDO/ICO)

WORK PACKAGE 8

General objective of the WP

- Comprehensive Care Networks (CCNs) are a recent organizational development in European cancer care. The diversity of scope and models of implementation are observed in our health systems with different levels of formalization in the relationship among the network components. In spite of the different organizational approaches, governance frameworks and evaluation of their performance, when available; the networks in cancer care always imply linking different providers and levels of care in a shared coordination strategy in order to improve the performance of cancer services at a regional or national level. Such approach should be analyzed in order to build the proposed models on the actual experience and outcomes of the existing networks. Key contents of the arrangements of the networks, such as authority, ways to improve the existing skills and experience and knowledge circulation, will also be considered in the analysis of the discussion about networks in EU cancer care.
- The objective of this WP8 is to propose a working definition of Comprehensive Care Networks in European health systems, based on the selection and analysis of empirical evidence and the perspectives of developments of this organizational approach in fields such as research translation into clinical practice, care coordination for highly-complex procedures and evaluation systems of networks' performance.

WORK PACKAGE 8

Tasks of the WP

The main tasks of this WP are the following:

- **Task 8.1:** Define the networks and governance models for cancer care in EU taking into account the diverse models of organization in health systems.
- **Task 8.2:** Assess the models of implemented care pathways in different network experiences in EU health systems using a multiple case study approach.
- **Task 8.3:** Analyze the potential role of networks in prompting translation of research findings into patients' care. A case study of molecular tumor boards implementation and the use of real-world data to assess outcomes in cancer care within networks.
- **Task 8.4:** Propose indicators of effectiveness of networks in cancer care, both qualitative and quantitative.
- **Task 8.5:** A final analysis summarizing our findings, and their consistency with other WPs particularly with WP6, will result in a proposal of a working definition of cancer networks, its governance, functioning and evaluation based on the existing experiences and flexible enough to be integrated into the reality of cancer services in Europe.

HORIZONTAL WORK PACKAGES

WP	Title	Description	WP Leader
1	Coordination	Actions undertaken to manage the Joint Action and to make sure that it is implemented as planned.	Slovenia (NIJZ)
2	Dissemination	Actions undertaken to ensure that the results and deliverables of the Joint Action will be made available to the target groups.	Greece (1st YPE)
3	Evaluation	Actions undertaken to verify if the Joint Action is being implemented as planned and reaches the objectives.	Romania (IOCN) and Croatia
4	Sustainability	Actions undertaken to ensure the follow-up of the project after the end of the funding/ actions undertaken to ensure long term sustainability.	Belgium (Sciensano) and Poland