



D1.2 Final report

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Project Information

Project Full Title:	Network of Comprehensive Cancer Centres: Preparatory activities on creation of National Comprehensive Cancer Centres and EU Networking
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Abbreviations and Acronyms

CCC	Comprehensive Cancer Centre
EC	European Commission
EU	European Union
MS	Member State





Executive Summary

Europe's Beating Cancer Plan (EBCP) adopted in 2021 makes an important milestone in European health policy. It is the first document at the level of the European Union that aims at reducing inequalities and disparities in cancer and in quality of cancer care. This is to be achieved through collaborative efforts of all Member States in joining forces to overcome the present shortcomings in prevention, care and survivorship.

Joint Action CrANE (JA CrANE) has been developed based on Flagship 5, which stipulates that an EU Network of Comprehensive Cancer Centres (CCCs) bringing together national CCCs is to be established and that a CCC should be established in every Member State. JA CrANE was faced with an important challenge, which was accepted by 24 Member States and Norway.

JA CrANE has been structured in a way to prepare all the necessary preconditions for the start of the EU Network of CCCs by the deadline set by EBCP. It included 4 core Work Packages (WPs) dealing with the key contextual concepts and their contents as well as the standard joint 4 WPs (coordination, dissemination, evaluation and sustainability). Work Package 4 on Sustainability was designed in a particular way that will represent the fil rouge to the next project JA EUNetCCC.

Hereby, we introduce some of the key topics and activities of JA CrANE and its workpackages.

Work Package 4 proposed two key deliverables – one is the Maturity Model, and the other one is Blueprint. The former should serve as a self-assessment tool for new and aspiring CCCs and should be seen as a dynamic document, which will be further developed and elaborated with the development of CCCs within the network. Blueprint should serve as a tool building on the experiences and deliverables of both, JA iPAAC and JA CrANE and provide for the continuity in all those solutions, which will be used to support the EUNetCCC.

Work Package 5 dealt with the Governance and Organisational structure of the future EUNetCCC. As a first step, a consensual definition of a Comprehensive Cancer Centre (CCC) has been agreed upon. This was followed up by a lengthy discussion on the Governance and on the admission criteria for the EUNetCCC. Eventually, a compromise solution was chosen as it encompasses building on the existing certification mechanisms as used and provided for by OEI and DKH – Deutsche Krebshilfe. The initial membership will thus be secured for all existing certified CCCs as per these two mechanisms until the expiry date of the respective certificates.





Membership will provisionally be granted also to all those Member States and their Competent Authorities (CAs) where no CCC has been certified yet. Governance of the EUNetCCC will include four bodies with different responsibilities, where adequate voice for the MS representatives has been secured through the MS Board, which will also participate in the decision-making processes.

Work Package 6 was exploring the links between CCCs and CCCNs, the latter having been developed through different JAs over the last decade. Furthermore, this WP developed Sets of Standards for CCCNs as well as a Patient Pathway for Lung Cancer (following up on the activities laid out by JA iPAAC). Two CCCNs for lung cancer have been established and certified internally by the project, namely one in Wroclaw and the other one in Luxembourg. CCCNs may be an important bridging tool in order to connect CCCs to the different national and regional setups, whenever these might be a preferred policy option.

Work Package 7 had as its mission the mapping the features of the existing and potential CCCs in Europe as well as the development of sets of standards for CCCs, which would then serve both for the review of the existing certification schemes as well as for the certification of existing and new CCCs through a mechanism guided by the EUNetCCC. This inclusive and consensual process included all the relevant stakeholders in the EU and provided for a broad space for the mapping of the future landscape of CCCs, considering the various settings as well as several specifics underlined by different MSs. Sets of standards were produced, which will then be implemented in the future JA EUNetCCC.

Work Package 8 was dealing with the mapping of the existing cancer institutional networking setups around CCCs, including their structure, governance, financing and responsibilities. This was an important input for both, WP5 and WP6 in their elaboration of the proposed solutions. Three other important topics have been elaborated in this WP, namely the implementation of the pathways through cancer networks, impact of networking research and finally, models and good practices in survivorship and return to work.

Supporting the endeavours of the core workpackages, additional activities were undertaken to ensure successful implementation of the results and quality monitoring throughout the project, namely properly planned communication, dissemination and evaluation activities.

Through various channels, Work Package 2 ensured effective and continuous communication and dissemination, with the focus on addressing all interested parties and potential stakeholders, including healthcare professionals, researchers, patients and patient organisations, policymakers and the broader public.





CrANE European Network of Comprehensive Cancer Centres

In parallel with the ongoing processes, Work Package 3 carried out several evaluatory activities in order to monitor and assess whether the project had produced planned results and whether they are in accordance with the proposed objectives, whether it delivered expected benefits or achieved the desired degree of implementability of the new findings in Member States, and whether it made the changes needed.

We believe that we have comprehensively addressed the most important aspects and challenges of the setting up of the EUNetCCC, which will be a collaborating network of 31 countries. Obviously, the ‘proof lies in the pudding’ as they and the future work on all the elements presented here will have to focus on the challenges, barriers and successes of the proposed solutions. All of these will be elaborated and regularly discussed by the bodies of the future EUNetCCC, which will contribute to two of the most important goals of EBCP – to the reduction of the inequalities and disparities in cancer care and cancer control in Europe and in raising the bar for quality of cancer care across the EU.

