

Towards comprehensive cancer care in Latvia

Progress and impact in Latvia

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Overview

- Population 1.88M
- 80000 Cancer patients
- 12000 new cancer patients yearly
- 6000 cancer-related deaths annually

Approx.90% of cancer patients seen in Riga East University Hospital and Paula Stradina University Hospital

Flagship 5: The Commission will establish, by 2025, an **EU Network** linking recognised National **Comprehensive Cancer Centres** in every Member State⁵⁶. It will facilitate the uptake of quality-assured diagnosis and treatment, including training, research and clinical trials across the EU. This cross-border collaboration will improve

This action will help deliver higher-quality care and reduce inequalities across the EU, while enabling patients to benefit from diagnosis and treatment close to home. The Cancer Plan aims to ensure that **90% of eligible patients** have access to such **centres by 2030**.

Areas to be improved

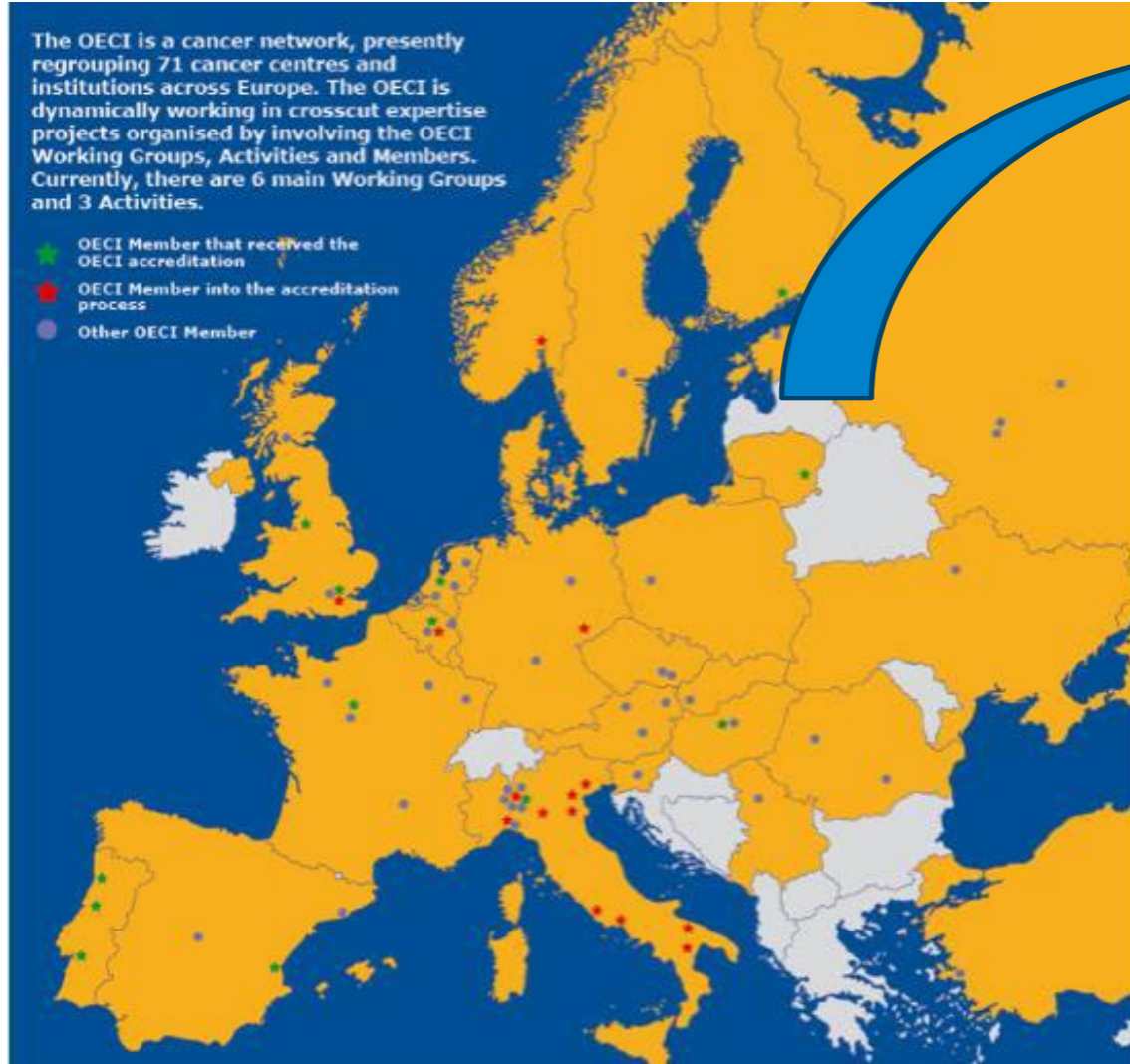
- Malfunction of cancer registry
- Low cancer screening coverage rates
- Insufficient data digitalization

Areas to be improved

- Translational cancer research – Lack of MoH managed National State Research programme
- Undetermined minimum standards in cancer care
- Cancer center/comprehensive cancer center
- Cancer care inequalities nationwide and across EU
- Insufficient palliative care capacity
- None standardise MDT protocols
- Lack of effective Information and Communication technology systems (EHR, etc.)
- Investment in healthcare – 201Eur per capita – one of the lowest

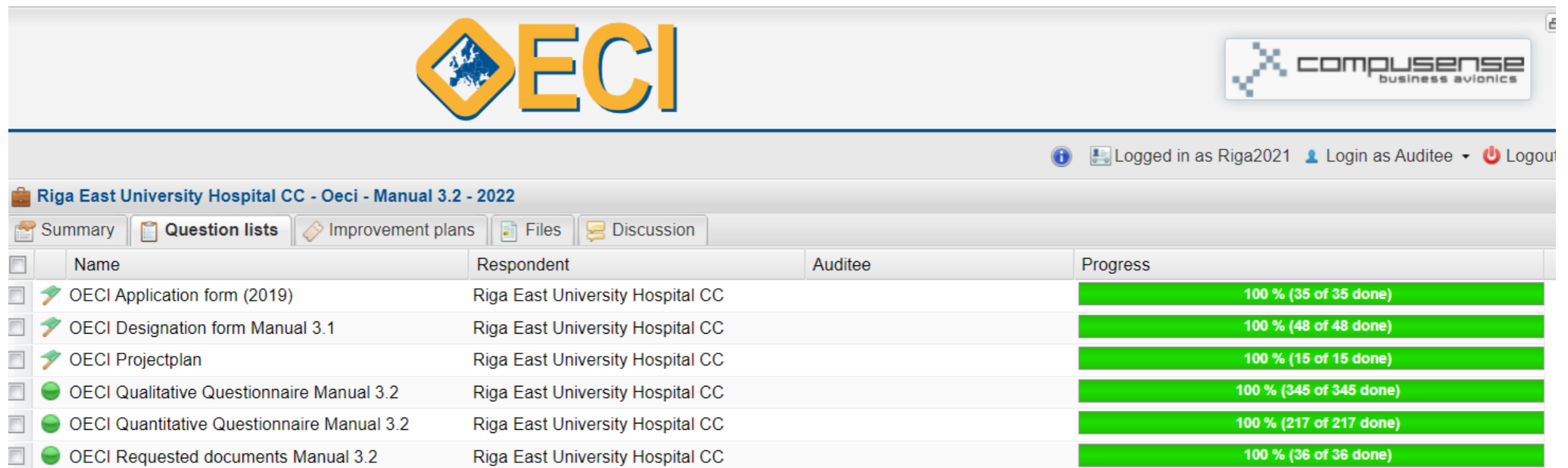
The OECI is a cancer network, presently regrouping 71 cancer centres and institutions across Europe. The OECI is dynamically working in crosscut expertise projects organised by involving the OECI Working Groups, Activities and Members. Currently, there are 6 main Working Groups and 3 Activities.

- ★ OECI Member that received the OECI accreditation
- ★ OECI Member into the accreditation process
- Other OECI Member



- OECI Member A&D certified Comprehensive Cancer Network
- ★ OECI Member A&D certified Comprehensive Cancer Centre
- ★ OECI Member A&D certified Cancer Centre
- ★ OECI Member in the A&D process
- Other OECI Member

Self assessment



Name	Respondent	Auditee	Progress
<input type="checkbox"/> OEI Application form (2019)	Riga East University Hospital CC		100 % (35 of 35 done)
<input type="checkbox"/> OEI Designation form Manual 3.1	Riga East University Hospital CC		100 % (48 of 48 done)
<input type="checkbox"/> OEI Projectplan	Riga East University Hospital CC		100 % (15 of 15 done)
<input type="checkbox"/> OEI Qualitative Questionnaire Manual 3.2	Riga East University Hospital CC		100 % (345 of 345 done)
<input type="checkbox"/> OEI Quantitative Questionnaire Manual 3.2	Riga East University Hospital CC		100 % (217 of 217 done)
<input type="checkbox"/> OEI Requested documents Manual 3.2	Riga East University Hospital CC		100 % (36 of 36 done)

66% YES
34% NO



Improvement plan



CC accreditation → CCC accreditation

Center of Disease Prevention and Control has started activities for the gradual implementation of these recommendations!

Screening Actions

➤ **Submitted recommendations:**

Screening management and legislation

1. Approved amendments to the CDPC and NHS regulations, clearly defining the division of functions between them.
2. Creation of a screening committee
3. Screening program governance—The Centre for Disease Prevention and Control (October 2023)

Screening organization, financing and resources

1. Develop clinical pathways (referral pathway)
2. Develop and implement a training program and plan, as well as organize training courses for screening service providers
3. Additional budget allocated for the training of screening service providers

Screening Actions

➤ **Submitted recommendations:**

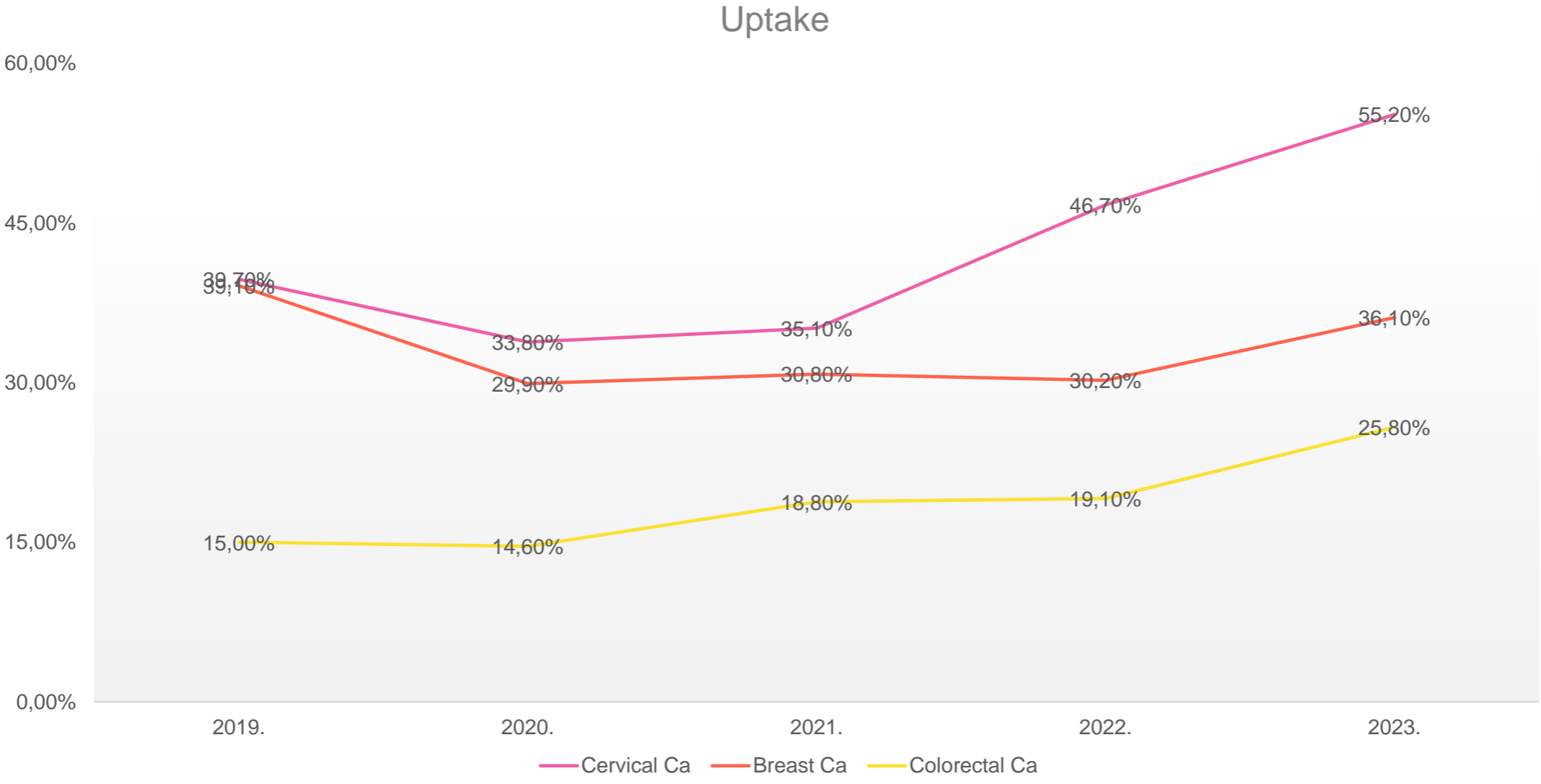
Screening tests and diagnostics - guidelines and protocols.

1. Develop and approve the latest evidence-based guidelines and protocols for all cancer screening programs
2. Conduct regular reviews of guidelines and protocols
3. Establish a system to measure and evaluate the compliance of screening services with guidelines.

Invitations and communication with screening participants – **raising awareness!**

1. Strengthen the system of invitations
3. Implement an invitation-reminder system
4. Develop written guidelines for communication with screening participants
5. Inclusion of colorectal cancer screenings in an organised screening system with invitations.

Cancer screening coverage rates



Cancer registry

New Population Based Cancer Registry (CDPC)	New Cancer Screening registry (CDPC, NHS)	Clinical Cancer Registries (REUH)
<p>Implementation phase: 2022/2023</p> <p>Population based Cancer registry.</p> <ol style="list-style-type: none"> 1) Patient demographics 2) Basis of Diagnoses 3) Basis of Treatment 4) Course of Disease. <p>Data for official statistics and reporting to OECD, IARC, ENCR etc.</p>	<p>Analysis phase: EC and IARC expert project 2022/2023/2024</p> <p>To improve cancer screening process in Latvia.</p> <p>Improvements in cancer screening process, quality, structured data for analysis.</p> <p>Data analytics and identification of possible improvements in patient monitoring process, screening provision etc.</p>	<p>Clinical Cancer Registry (-ies). 2024.-.... (REUH)</p> <p>To analyze and improve cancer patient treatment.</p> <p>Information for clinicians, researchers, etc. of treatment outcomes.</p> <p>Additional data of diagnostics and treatment, to provide data for outcome analysis (treatment result, complications, side-effects, reasons of treatment discontinue)</p>

Achievements

- Phase 1: Population based cancer registry is live from 02.01.2024.
- New regulations from 01.01.2024. – Data on laboratory tests integrated into E-health system
- Standardised MDT and Discharge letters implemented into REUH information system including all data for the needs of cancer registry and OECl accreditation (quantitative and qualitative indicators)

Palliative support

Pilot project on «hospice at home» has been a great succes

- Mobile palliative care teams are available 24h after referral nationwide from 01.01.2024.
- Covering all patient needs at home including: symptomatic treatment, nutritional support, rehabilitation and supporting equipment, psychological support, palliative specialist consultations etc.
- Decreased number of hospitalisation for palliation

Data management

- Signed an agreement on data exchange between 2 University Hospitals - currently radiology, plan for patient health records and laboratory data
- Currently until 30.06.2024. outsourcing service provider Ernst&Young conducts an assessment of what the costs of a comprehensive HIS could be. 6 solutions are being evaluated - 2 local, 4 international, also E&Y will provide a description of the technical specification - what modules should be included in the system.
- 3.50M Eur from the Recovery and Resilience Facility have been clearly assigned, after receiving the E&Y report, additional funds will be covered by EU funds and part of the budget.

DR Reform ICCCS Project Recommendation Implementation

- Governance and legislation – roles of responsible authorities
- Screening test and diagnosis – guidelines and processes – Disease Prevention and Control Center cooperates with Netherlands to improve the screening process
- Organization, funding and staff – additional funding allocated for cancer beating policy
- Innovations and communication with screening participants – NHS innovation laboratory project for innovative services in Healthcare - Total budget 19,4M Eur. Regular meetings in the ministry with the patient organizations.

More on recommendations

- ✓ Raising awareness –
 - ✓ Involvement of government representatives in public awareness activities
 - ✓ Workshops led by academic sector representatives in order to consider reorganization of different processes with involvement of broad range of target groups.
- ✓ Data and IT system –A separate institution for digital health management established (apart from NHS) and will take over functions from NHS starting from 1 January 2025.
- ✓ Quality assurance – Methodological Centers will be established by the end of the year, with the scope on data quality and service quality.
- ✓ Research – discussions with the Ministry of Health how to practically foster research and more active involvement of hospitals.

Activities towards comprehensive cancer infrastructure



Current engagement



Vision of a comprehensive cancer infrastructure in a model of Latvia



Ministry of Health

National Health Service
Centre for Disease Prevention and Control



Ministry of Education and Research



Ministry of Environmental Protection and Regional Development



Ministry of Welfare



Ministry of Economics

Investment and Development Agency of Latvia



Ministry of Finance



ONKOALIANSE
ONKOLOĢIJAS PACIENTU
ORGANIZĀCIJU APVIENĪBA

and other patient
advocates

- 1 Launch UNCAN.eu – a European Initiative to Understand Cancer
- 2 Develop an EU-wide research programme to identify (poly-) genic risk scores
- 3 Support the development and implementation of effective cancer prevention strategies and policies within Member States and the EU
- 4 Optimise existing screening programmes and develop novel approaches for screening and early detection
- 5 Advance and implement personalised medicine approaches for all cancer patients in Europe
- 6 Develop an EU-wide research programme on early diagnostic and minimally invasive treatment technologies
- 7 Develop an EU-wide research programme and policy support to improve the quality of life of cancer patients and survivors, family members and carers, and all persons with an increased risk of cancer
- 8 Create a European Cancer Patient Digital Centre where cancer patients and survivors can deposit and share their data for personalised care
- 9 Achieve Cancer Health Equity in the EU across the continuum of the disease
- 10 Set up a network of Comprehensive Cancer Infrastructures within and across all EU Member States to increase quality of research and care
- 11 Childhood cancers and cancers in adolescents and young adults: cure more and cure better
- 12 Accelerate innovation and implementation of new technologies and create Oncology-focused Living Labs to conquer cancer



aslimnīca



REUH and other hospitals



UNIVERSITY
OF LATVIA

Universities and their res. institutes



RĪGA STRADIŅŠ
UNIVERSITY



BMC
Latvian Biomedical
Research and Study Centre

Research organizations



Latvian Institute of
Organic Synthesis

ancer culture, communication and capacity building

ICCCS - project impact Conclusion

- The first project of its kind in Latvia – providing high quality detailed gap analysis in all areas of oncology care and giving structured recommendations on improvement plan
- Key of success - highly experienced international expert team with excellent organizational skills → were able to bring all relevant stakeholders at one table and start discussions
- Clear and strong vision of future directions towards comprehensive cancer care in Latvia

Thank You!

