



Crane

European Network of Comprehensive Cancer Centres

Presentation of the Joint Action – its objectives, goals and challenges

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European Network of Comprehensive Cancer Centres

The CraNE Joint Action was proposed for funding in response to the *Flagship No 5 of the Europe's Beating Cancer Plan*, which defines that the European Commission will establish by 2025, an EU Network linking recognised National Comprehensive Cancer Centres (CCCs) in every Member State



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The main aim of CraNE JA is to create an **EU Network** of the already existing and newly established CCCs to support the implementation of quality-assured:

**Early detection,
Screening,
Diagnosis & Treatment,
Support to cancer survivors, and
Research & Training of the cancer workforce**



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- CraNE JA will help deliver higher-quality care and reduce inequalities across the EU, while enabling patients to benefit from diagnosis and treatment close to home
- This JA will develop a sound model of the EU Network of CCCs, including the:
 - Professional,
 - Scientific,
 - Educational and
 - Administrative framework for a sustainable structure

Target Groups of CraNE JA



The target groups of CraNE JA are the main actors who will be concerned in the future development of the EU Network of CCCs:

- Representatives of Member States,
- Networks of CCCs,
- European organizations,
- Patients,
- Experts



General objective

- In order to facilitate the establishment of an EU Network linking recognised National CCCs in every MS, CraNE will prepare the necessary preconditions, administrative, professional, and those related to high-quality performance.
- This is necessary to facilitate both the integration of the existing CCCs as well as to support the MSs who still need to develop and certify such centres.
- CraNE JA will also provide an assessment of sustainability and feasibility as well as link the development of an EU Network of CCCs and CCCs in individual MSs to the development of national and regional CCCNs.



Specific objectives

1. To endorse the sustainability of the outputs of the CrANE JA towards future implementation into cancer care structures in the MSs;
2. To create an EU Network of National CCCs to improve cancer care and avoid the unacceptable disparities currently present across the EU;
3. To further develop the access and availability of comprehensive high-quality of care in CCCNs to all EU MSs and align the high standards in cancer care for all quality-assured institutions with a focus on the interfaces between care and research;
4. To develop a consensus model for CCCs, both standalone centres as well as centres, which are part of University or General Hospitals;
5. To identify and analyze the current practices and models of organisation in real-life settings as key references to assess how high-quality care and research are available to all cancer patients at a given regional and local level through networking models.

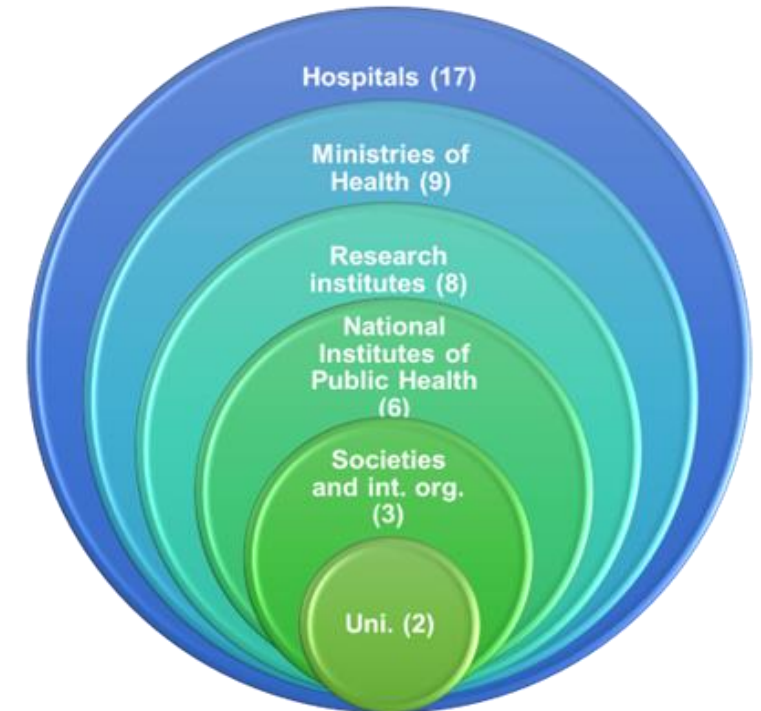
Who will collaborate?



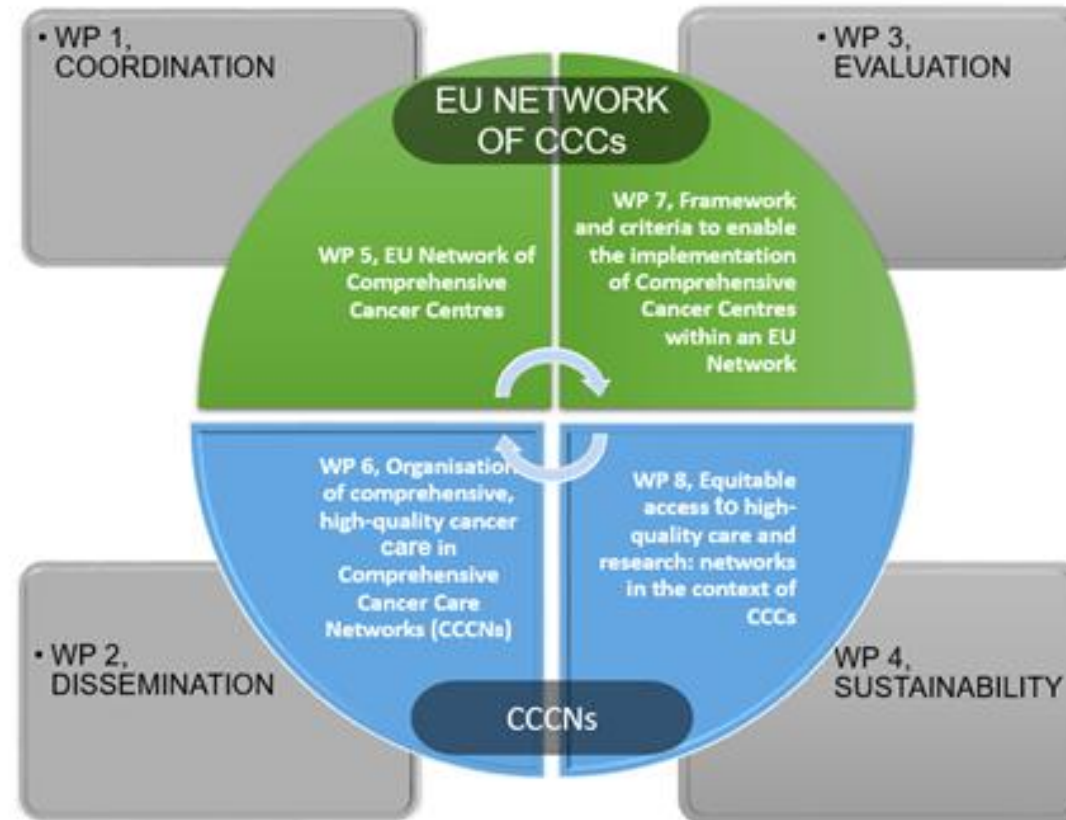
The CraNE JA brings together 44 partners:

- 25 Competent authorities and
- 19 Affiliated entities from 25 different countries

- 17 Hospitals
- 9 MoH
- 8 Research Institutes, 6 NIPH, 3 Societies, 2 Universities



Organisation of CraNE JA



Work Package 5

- The EU Network of Comprehensive Cancer Centres: composition, governance, joining process, and functioning
- *WP Leader: Italy*
- WP5 is providing the theoretical, practical and administrative framework

Work Package 7

- Framework and criteria to enable the implementation of Comprehensive Cancer Centres within an EU Network
- *WP Leader: France & Norway*
- WP7 is providing for the standards of care, research, education and training tasks

Work Package 6

- Organization of comprehensive, high-quality cancer care in Comprehensive Cancer Care Networks (CCCNs)
- *WP Leader: Germany*
- WP6 will further elaborate on the standards and quality of care of CCCNs and their relationship with CCCs

Work Package 8

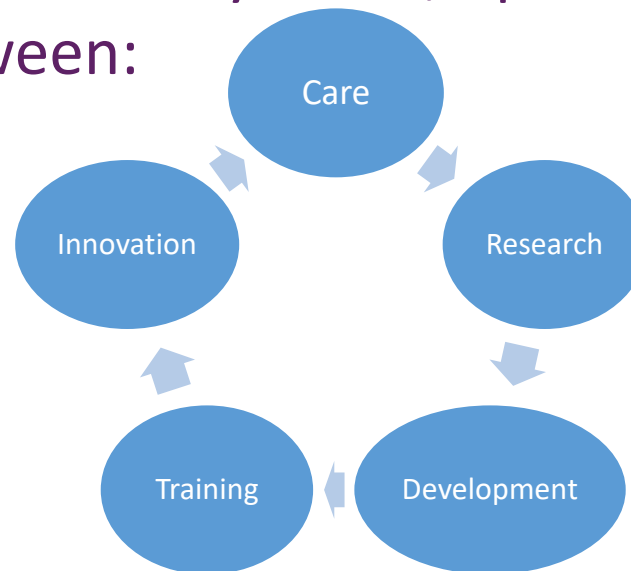
- Equitable access to highquality care and research: networks in the context of CCCs
- *WP Leader: Spain*
- WP8 will focus on the different organisational models of CCCNs in the EU MS, including the variations in their relationship with the respective CCCs.

Key challenges

- A clear mandate given by the Europe's Beating Cancer Plan (EBCP) and by its flagship:
 - Establishment of the Network by 2025
 - Ensuring access to 90% of the eligible patients to these centres by 2030
- A clear organisational preference
- Earlier consensual definition of a Comprehensive Cancer Care Network (CCCN)
 - Having a CCC in the centre and/or as the lead institution
 - A defined environment with clear internal rules, standards and procedures

Key challenges (2)

- Development of an inclusive definition of a Comprehensive Cancer Centre (CCC) – to be finalised shortly
- Strengthening the concept of CCCNs, where appropriate, while following its definition from JA CanCon (www.cancercontrol.eu)
- The EU Network of CCCs as a dynamic, open and inclusive organisation
- Ensuring the loop between:



Some points for discussion



- Terminological confusions between CCC and CCI = Comprehensive Cancer Infrastructures – hopefully solved through the joint work with CCI4EU
- More centralised solutions versus more decentralised organisational options
- The focus on access AND high quality care?
- Physical access might be inferior to the demand for high quality and organisational restrictions -> PET scans, proton therapy
- Links between:
 - ‚National‘ CCCs <-> ERNs <-> Networks of Expertise (NoEs)
 - Hierarchical or ‚hub-and-spoke‘ structure
 - Role of CCCs in research, training and education