Comprehensive Cancer Networks and Accreditation

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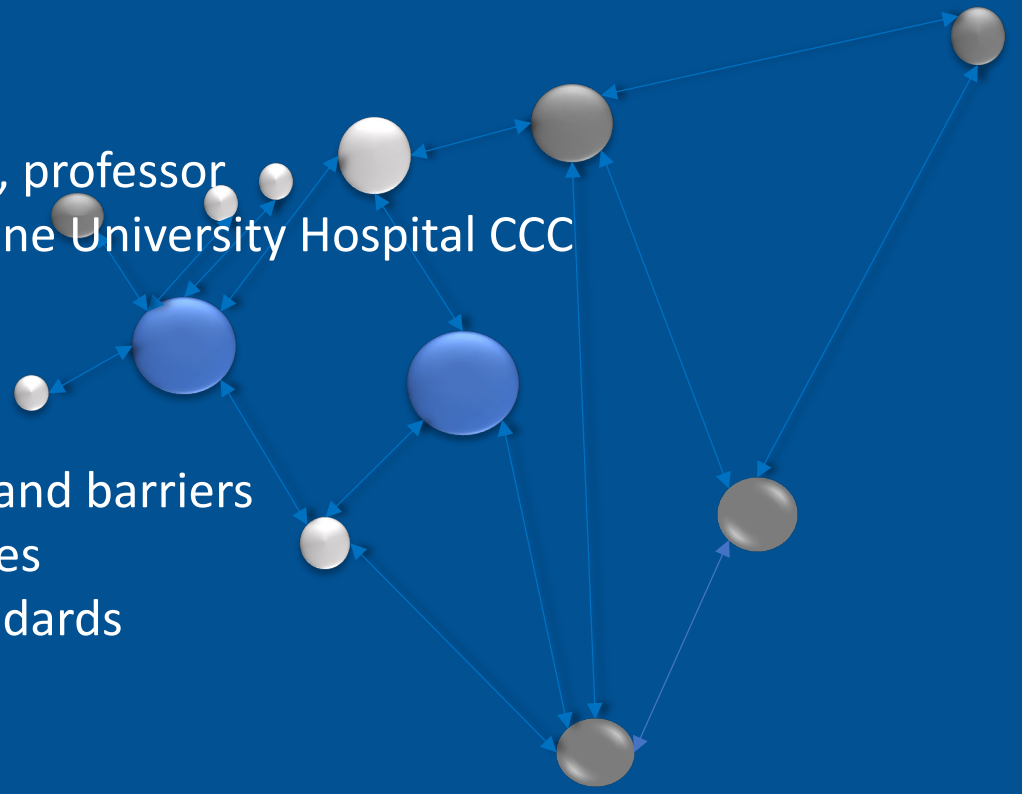
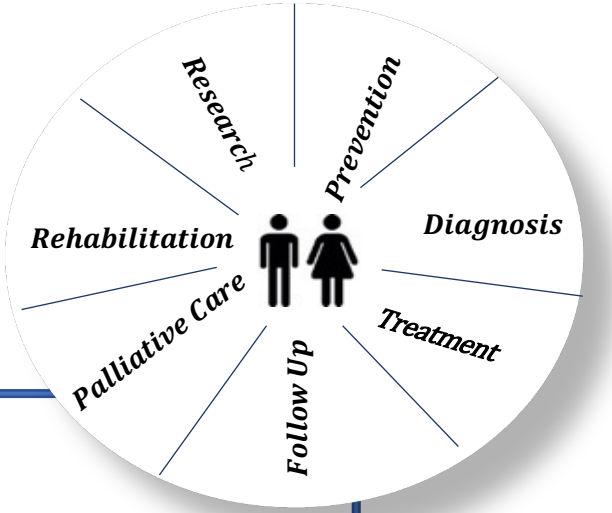
Chair, A&D Board

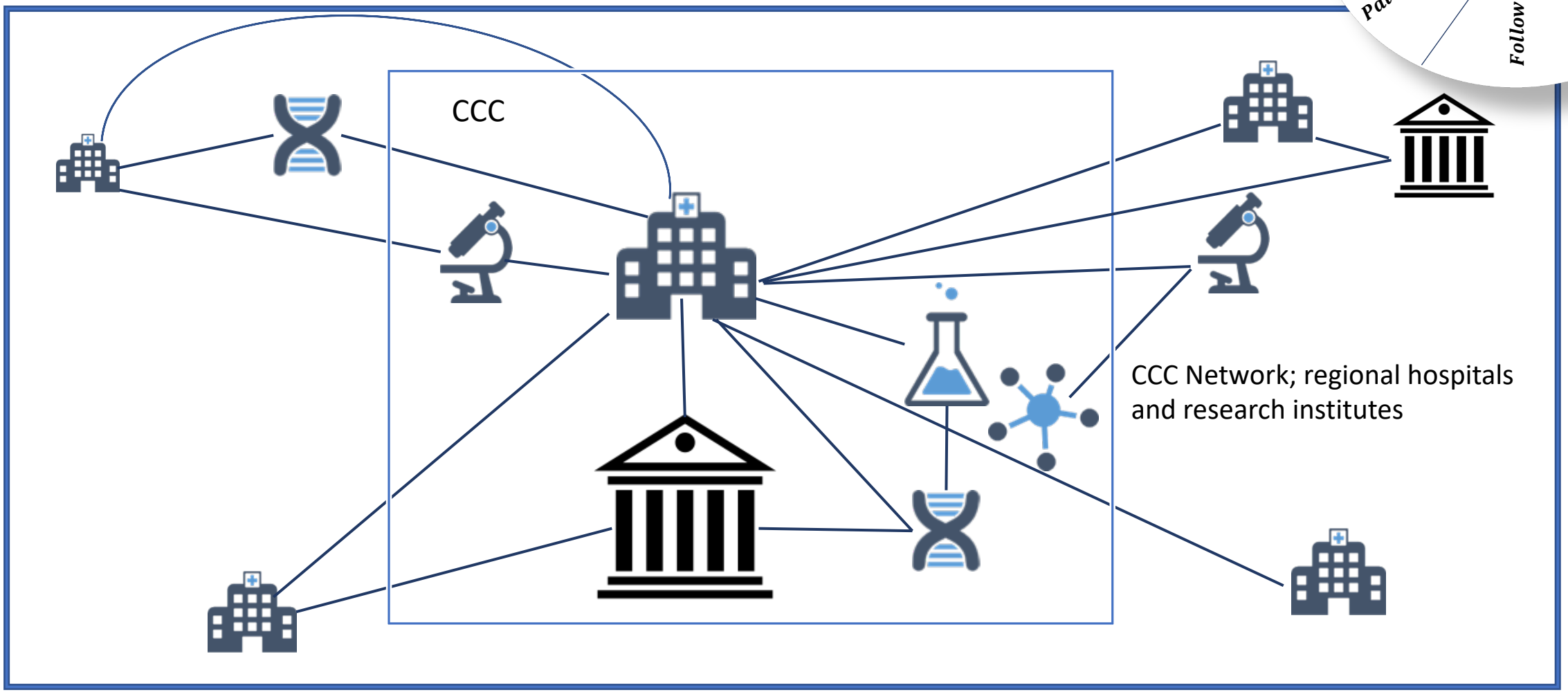


- Network benefits and barriers
- Network landscapes
- OECI network standards

ACCREDITATION AND DESIGNATION PROGRAMME

Comprehensive Cancer Networks





Multi-institutional networks on the rise

- Modern cancer care needs to balance complex treatments at highly specialized units with care close to or at home
- Maximized benefits and minimized drawbacks from centralization for quality-assured diagnosis and treatment
- Equity of care
- Shared specialist expertise, joint standards of care, knowledge transfer, dissemination of best practices, innovation and coordination of healthcare services
- Clinical trial capacity
- Safe and efficient data sharing

National and Regional Cancer Networks

Calman Hine report 1995 UK; genereralist to specialist services, reduced geographical inequalities and improved patient survival

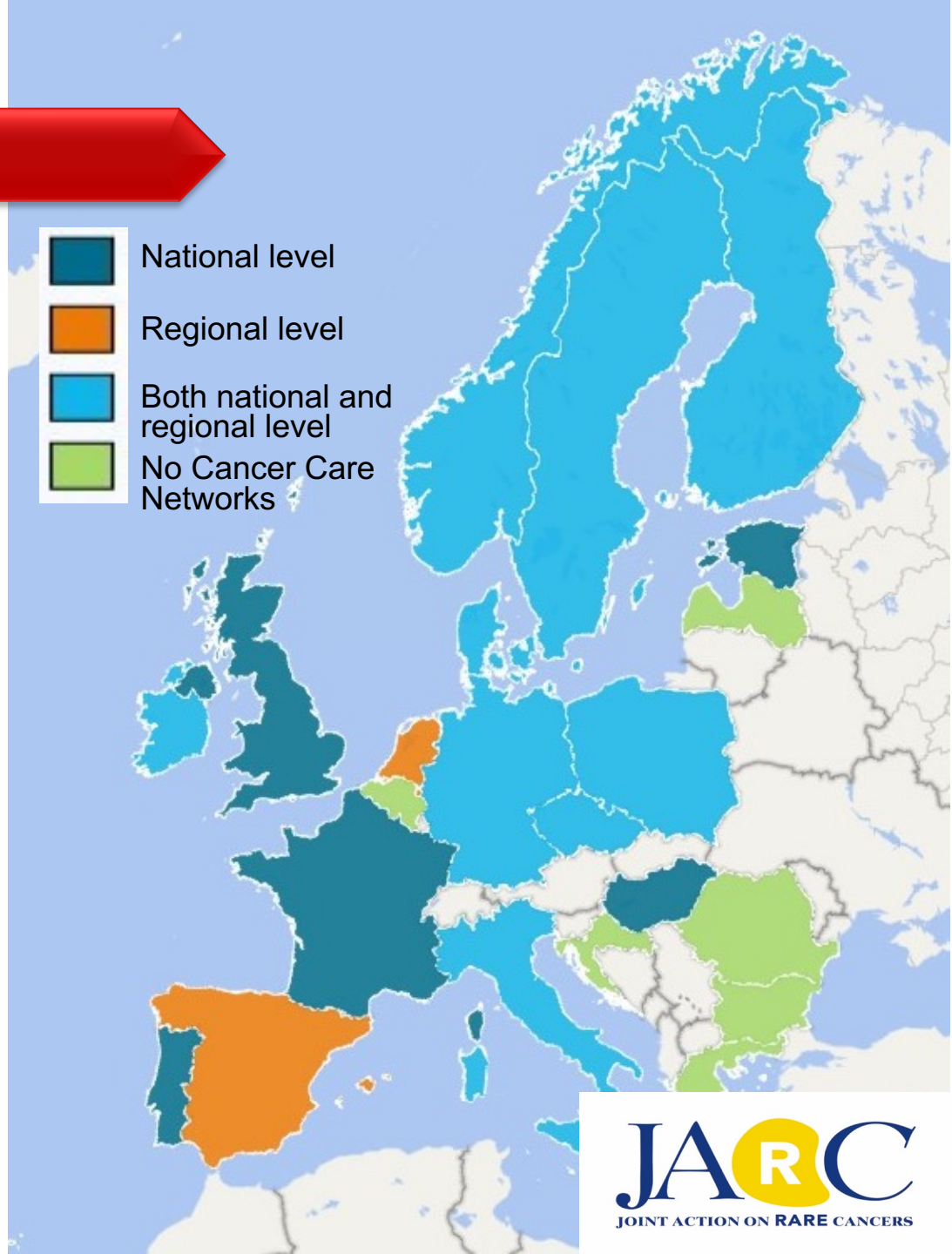
JA Rare Cancers mapped networks in 2017

Nivel (EU Health Support Consortium) “Quick scan of Cancer Infrastructures in European countries Report” identified 168 cancer infrastructures in 2021

EBCP goal: 90% of eligible patients have access to a comprehensive cancer infrastructure by 2030

Current status;

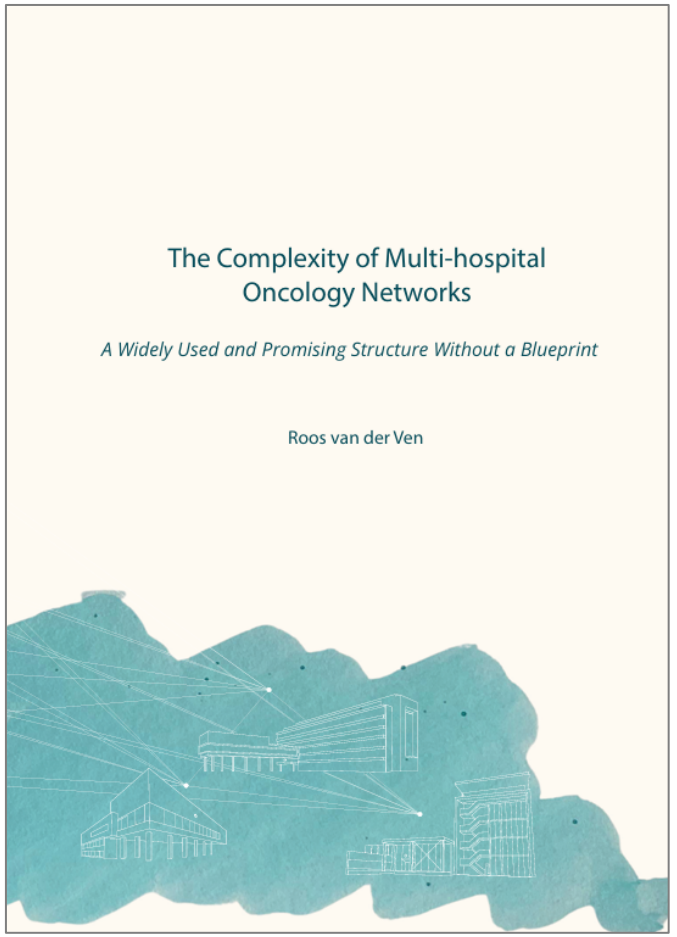
- Netherlands, regional oncology networks
- France and Italy, some well-developed regional networks
- Germany, outreach from CCCs
- Nordic countries, CCC networks in formation
- Several member currently lack formal networks



JARC
JOINT ACTION ON RARE CANCERS

Experience from Comprehensive Cancer Networks

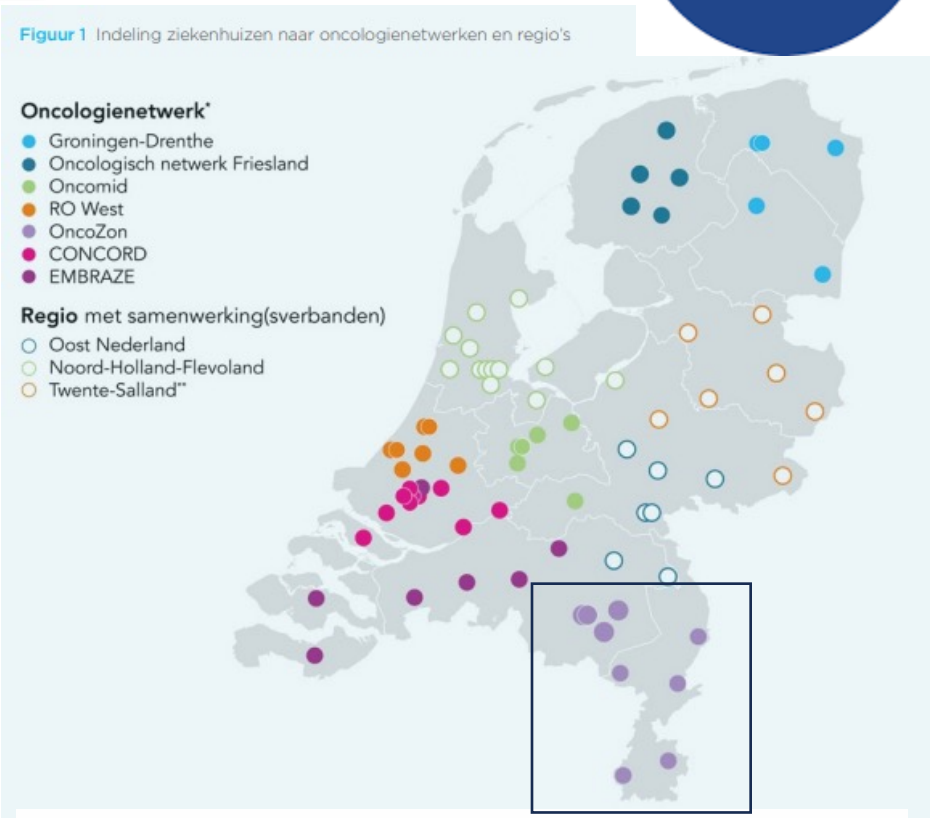
- New and growing research field within implementation science
- Experience often positive, but rarely focus on patient-centered outcomes
- Predominantly in hub-and-spoke model
- Governance varies; power imbalances with a subset of specialists from dominant centers
- Enablers and barriers:
  - Active convening of representatives - clear goal?
  - Dissemination process – collective agreement, roles and representatives, communication
  - Implementation - commitment, patient groups

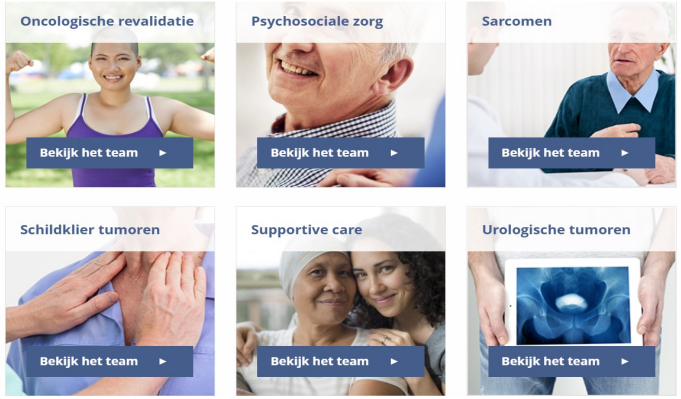


Roos van der Ven, Thursday at 11.20 am

Netherlands: Regional Oncology Networks

- 11 regional oncology networks
- 19% of oncology patients received cancer care at multiple centers, expected to increase
- 96% took place within a single oncology network
- Reduced differences, increase equal access (e.g. HIPEC, ablation/resection of liver metastases)
- Oncozon an accredited OECI Comprehensive Cancer Network, MDT teams have a key role





"Dichtbij als het kan, verder weg als het moet"

OECI COMPREHENSIVE Cancer Network

Samenwerkende ziekenhuizen

ANNA ZIEKENHUIS · catharina een santeon ziekenhuis · elkerliek ZIEKENHUIS · laurentius · Maastricht UMC+ · Maastro · máxima mc · SJG Weert · VieCuri medisch centrum · zuyderland

Roos van der Ven, et al.

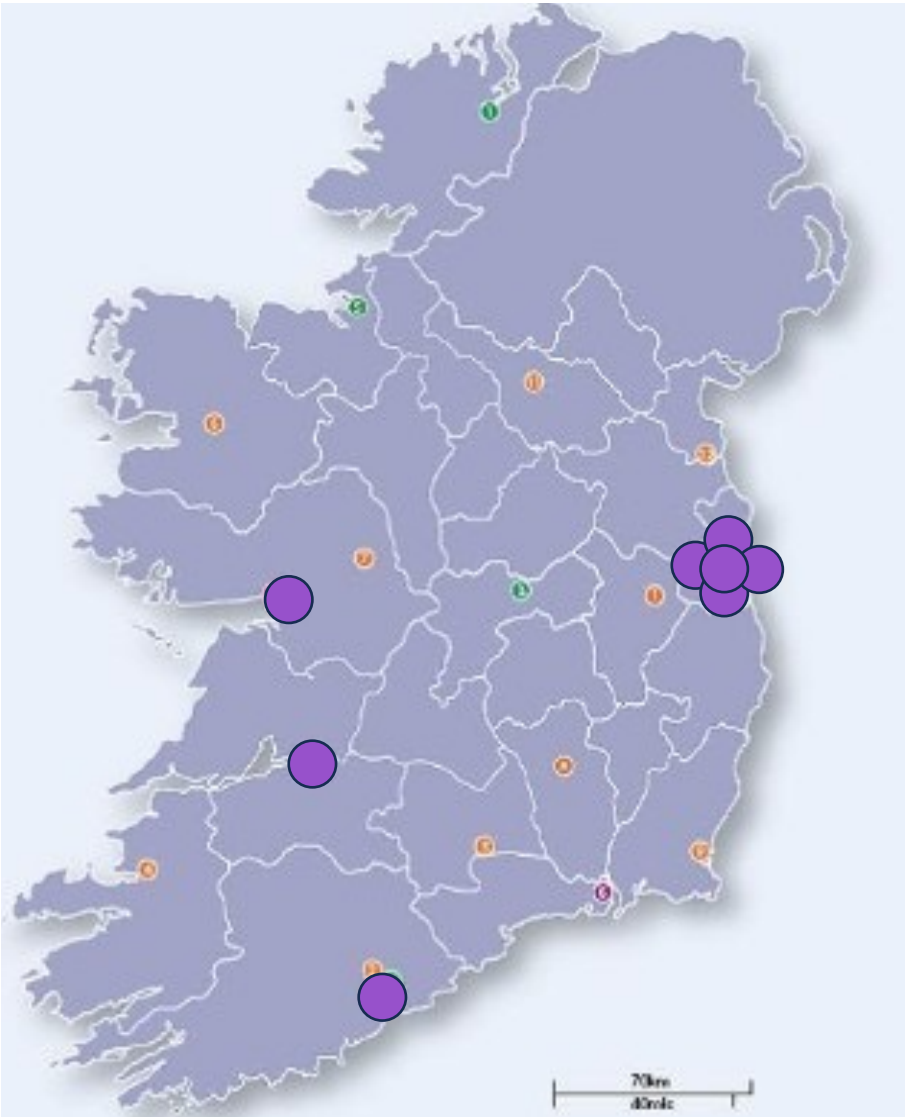
Sweden: Stockholm-Gotland Comprehensive Cancer Network

- 2.5 mio inhabitants
- Newly formed network in OECI accreditation

- Karolinska CCC, Karolinska University Hospital
- Cancer Research Karolinska Institutet
- Capio S:t Görans Hospital
- Danderyd Hospital
- Ersta Hospital
- RCC Stockholm Gotland
- Region Gotland
- S:t Eriks Eye Hospital
- Stockholms Health Care Region
- Södersjukhuset

Ireland: 9 designated centre, 8 of which are in the OECI programme

- Building on the benefits from accreditation
- Strong interconnectivity between centres
- All-Island Research Initiative
- Participation in CCI4EU deep-dive with a roadmap that guide and prioritize developments
- Increased capacity for clinical trials
- National thematic expert groups formed



- Beaumont Hospital
- Mater Misericordiae University Hospital
- Mater Private Network
- St Vincent´s Hospital
- St Jame´s Hospital
- Cork University Hospital
- Galway University Hospital
- University Hospital Limerick

Italy: Complete accreditation, national and regional networks

- 18 centres accredited/in accreditation

- Alleanza Contre il Cancro (ACC) brings together 27 institutes for care and research
- ACC has launched the National Oncology Information Service, coordinates 13 working groups, multiple clinical research initiatives and serves as the National Cancer Mission Hub

- Ongoing development of regional networks. Example of regional network: Piedmont–Aosta Valley Oncology Network with 1 CCC (Candiolo) in Turin, 13 local health authorities and 34 hospitals

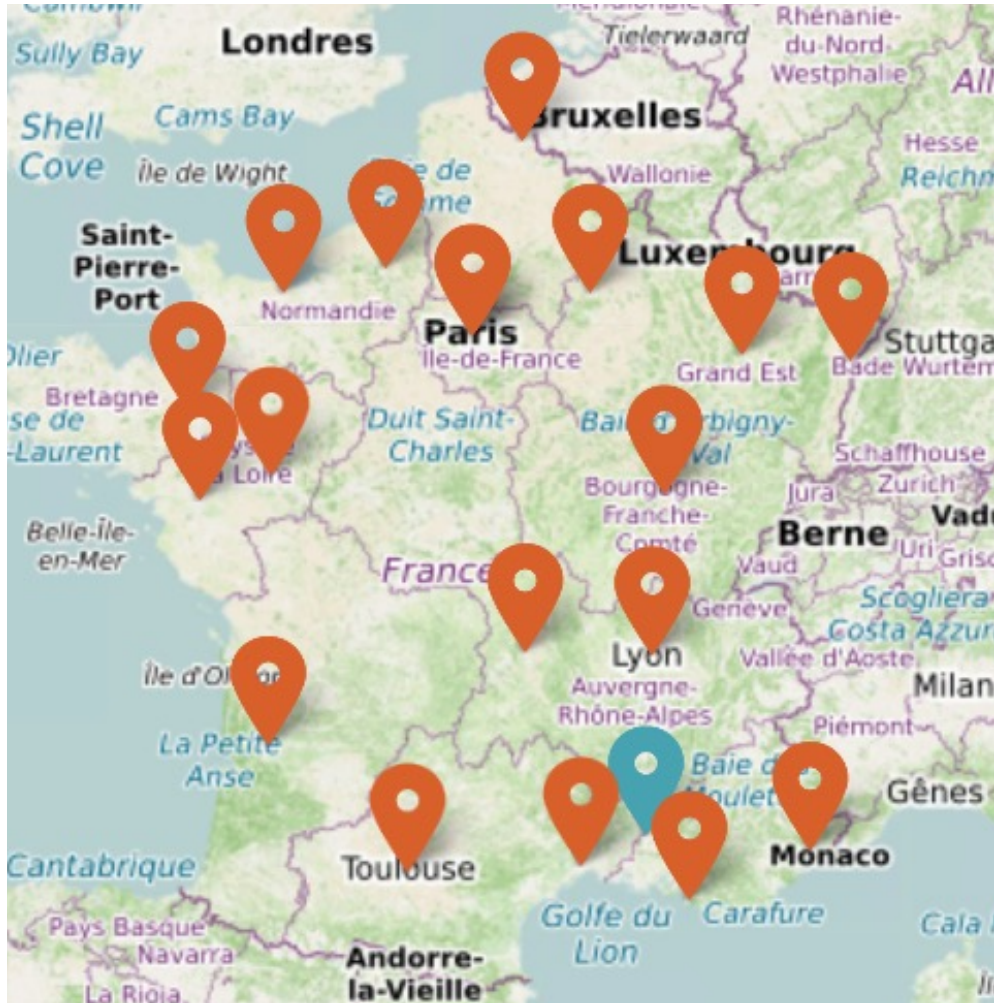
France: National and regional networks

Cancer networks in France are structured to meet the needs of the population and share expertise

Often UNICANCER centers that

- deploy medical specialists to other facilities
- manage MDTs at the regional level
- train professionals in cutting-edge techniques
- coordinate patient care pathways for access to high-quality care close to home

Example of regional network: Institut Pauli Calmettes in Marseille; partnership with some 20 healthcare providera in



Denmark; A strong research network and active development of CCCs

- National collaboration across research fields and sectors
- Rapid implementation of research and innovation
- Highest quality of cancer
- Strong development of OECI accredited centres

The Nordic-Baltic CCC Network

- Sharing experiences across borders, e.g. treatment principles, quality standards, strengths and opportunities and patient partnership
- Developing joint research initiatives

Evaluating CCNs – 8 basic principles

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ORIGINAL ARTICLE

OPEN ACCESS Check for updates

Evaluating comprehensive cancer networks; a review of standards and evaluation methods for care networks to inform a comparison with the OECI comprehensive cancer network standards

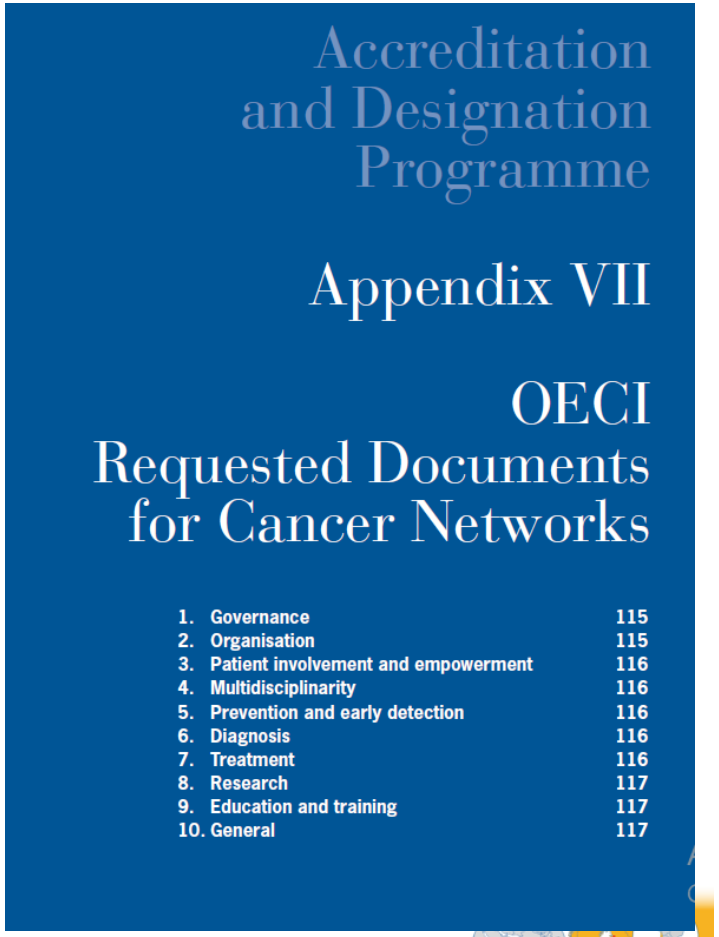
Anke Wind[a], Simon Oberst[b], Willien Westerhuis[b,c], Harriet Blaauwgeers[b,c], Gunnar Sæter[b,d], Paolo de Paoli[b,e], Péter Nagy[b,f], Jean-Benoit Burrion[b,g], Eva Jolly[b,h], József Lovey[b,f] and Wim van Harten[a,b,i]

- Defined governance structure
- Broad representation of key stakeholders
- Multidisciplinarity
- Patient-centredness
- Sharing best practices and promoting innovation
- Uniform quality standards and clinical guidelines
- Monitoring and continuous quality improvement
- Effective, consistent, and confidential data-sharing

Wind et al., Acta Oncol 2023

OECI updated network standards

- Emphasis on connectivity; consistency; collaboration; and equity of access to high-quality care and clinical trials
- 72 standards
- Apply the Network Standards transversally across the network
- **Structure and Governance**: Governance, operational standards, and effective ICT infrastructure
- **Clinical and Research Integration**: Shared clinical guidelines, MDTs, and research infrastructures
- **Patient-Centered care**



Examples of OECI network standards

- Network Board has representatives from each member
- Board of Directors provides strategic governance
- Written strategic plan, formally endorsed by the board
- Quality committee with representatives of each member
- Network records key summary data
- MDTs for each tumour type covered by the network
- Mechanisms to incorporate patient's opnions
- Documented patient pathway for each tumour (sub)type diagnosed or treated
- Enrolment of patients into clinical trials at the network level
- The Network provides oncological continuing professional education

Summary; connectivity, consistency and collaboration

- Clear **governance**
- At least one CCC or large CC present
- Complete **patient pathways**
- **Aligned MDT** principles and structures
- Strategic **research collaboration**
- Shared **clinical guidelines**
- Consistent approach to **data registering**
- **IT interoperability** and data sharing

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We welcome accreditation of Comprehensive Cancer Networks!

OECI's Network Standards follow these principles