

OECI Magazine

Organisation of European Cancer Institutes

European Economic Interest Grouping

December 2017











# Oncology Days

19th-22nd June 2018 Poznan, Poland

GENERAL ASSEMBLY SCIENTIFIC CONFERENCES AND RELATED EVENTS



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# For more information: www.oeci.eu/Assembly.aspx



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# **OECI Presidential message**



**Dominique de Valeriola** Institut Jules Bordet

Dear Readers.

2017 has been a significant year for the OECI, whose role is now firmly anchored in delivering quality comprehensive cancer care through its growing European network of cancer centres and their dedicated professionals. The engagement of a growing number of cancer centres and the increasing interest in the OECI Accreditation and Designation Programme, even beyond the European boundaries, have reinforced the visibility of our Organisation, which has now reached a target of 82 member cancer centres from 27 countries.

The recent certification obtained from the International Society for Quality in health care (ISQua) for our OECI Accreditation and Designation Programme is a milestone for the OECI validating that our standards are comprehensive and providing credibility in the quality assurance of our approach. The ISQua label is an important recognition of all the work done over the past years by several devoted people from our member cancer centres and the very motivated team from the IKNL. I would like to warmly congratulate the A&D present, Simon Oberst, and past Chairs, as well as all the support team and the auditors for this major achievement for the OECI. Our goals now are to consolidate and expand the Programme further, as well as to continuously adapt the standards to the evolution of care and cancer organisation.

An update on the OECI certified cancer centres, the so-called "OECI Quality Network", is presented in this first edition of the OECI Magazine. Our readers can also find information about the latest OECI certified cancer centres via the renewed OECI website, which is regularly updated at http://www.oeci.eu/Accreditation/Centres.aspx?type=CERTIFIED.

Creating links and sharing our experiences and findings from the Working Groups, with the ultimate goal of helping our cancer centres increase the quality and delivery of their services to patients, who lie at the centre of our efforts and strategies, are actively being pursued. In this endeavor, our close collaboration with the European Cancer Patient Coalition, ECPC, is an important pledge to better understand and address the expectations of cancer patients.

Forging partnerships with other like-minded organisations, such as the European Cancer Organisation, ECCO, and the International Union for Cancer Control, UICC, and collaborating with some of the most important EU Joint Actions, have also marked this year as milestones in the history of our Organisation. I would like to extend my gratitude for all the hard work undertaken and the coordinated efforts of our Members, the Board, the Working Groups' Chairs and all the staff of our Organisation.

Preparations are already underway with next year's OECI 2018 Oncology Days, and our dynamic host, Professor Julian Malicki, General Director of the Greater Poland Cancer Centre, will be welcoming OECI members to the historical city of Poznan from the 19-22<sup>nd</sup> of June to celebrate the 40<sup>th</sup> OECI Anniversary.

This year will be the last one of my OECI Presidency and it will be an important year of transition, with the renewal of several Board Member positions and Professor Thierry Philip as the new President starting in June 2018. I deeply hope that we will continue to work in the nice spirit that we have developed together over the past years.

This new OECI Magazine and all the other communication initiatives are our best way of promoting the OECI mission and accomplishments; I hope that the readers will appreciate and enjoy the resumes and articles appearing in this very first edition.

# The President Elect Programme OECI members participating Oncology, Days, had the

Thierry Philip Institut Curie OECI members participating in last June's Oncology Days had the opportunity of meeting Professor Thierry Philip, who presented an outline of the Programme for his Presidency, during the Annual General Assembly.



Being partial to upholding continuity, my first objective is consolidating the OECI A&D Programme. I plan to continuously assess the Programme's impact through the actions of all the OECI Working Groups, the OECI participation with EU projects and especially through a structured collaboration with the European Cancer Organisation (ECCO).

I intend to carry forward the ground breaking work achieved by the OECI Biobanks and Molecular Pathobiology WG. We have already established an important link with the European Society of Pathology, the European Association for Cancer Research, the Impacts Network and the European Infrastructure on Biobanks and Molecular Resources. This WG is linked to our participation in the development of Precision Medicine approaches to cancer.

The OECI will continue nurturing cooperation between our institutions and patient organisations, namely and in partnership with the ECPC, the largest European Cancer Patient Coalition. Improving the visibility of these actions, and making them become more understandable, will be a priority for the coming years.

Another objective will be to conceptualize a Comprehensive Cancer Centre, including the virtual organisation of a cancer centre associated with a general or university hospital. We should produce "position papers" to clarify the process of where and how to position ourselves. The recently obtained ISQua certification is an extremely important recognition of the OECI's A&D Programme, and the hypothesis of linking our A&D Programme with ECCO is now a clear goal to be pursued under my presidency.

We must advance the pursuit of OECI collaborations with other Organisations and create links with them, in particular with the ones that unite research centres because while we must advocate quality of care everywhere, we must also defend the model of multidisciplinary treatment of cancer. This model was established in 1909 by Marie Curie and should be adapted into national and regional contexts. Quality requires a multidisciplinary and continuous adaptation of the model, which will always retain collective work for patient-specific treatment.

Training and continuous education, a topic already partially addressed by the OECI, will bring opportunities for our Members to access the needed training offer, to keep abreast of the rapidly evolving equipment and therapeutic approaches stemming from innovation. A strategic alliance with the European School of Oncology must therefore be pursued.

The OECI represents "the facto" multidisciplinarity in cancer care and as such must act as an inclusive Organisation, whose mission is to help reduce barriers still existing amongst "corporations" and "professionals". Galvanizing the European cancer community to work in partnership, expending our joint efforts on reducing disparities and providing the best available cancer treatments in the context of sustainable health care systems for all European cancer patients, will pave the way forward.

#### **NOTE ON THE AUTHOR**

Professor Thierry Philip is a Medical oncologist, Full Professor of medical oncology, and since 2013 Chairman of the Board of Directors of Institut Curie.

He served at the Centre Léon-Bérard, as Head of Department of the Outpatient Clinic Medical unit, Head of the Bone Marrow Transplant unit, and then as the centre's Director founding the Cancer-Environment-Health Economics Department.

He held the position of President of the French National Federation of Cancer Centres, which became UNICANCER in 2010, and President of the French National Cancer Committee. He also chairs the Clinical and Translational Scientific Research Advisory board of the Belgian Cancer Foundation.

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# N-1 Approach: a proposal for the development of a more patient oriented clinical research

A new approach for clinics-research integration, here named the "N-1 Approach", refers to a recently published paper by North American and European oncologists, who met in a Delphi group and described an application of the N-1 trials concept to oncology (Klement et al 2016). This proposal derives from the discussion on the issue held during the OECI Pathology Day (Brno June 21st, 2017) and in Brussels on October 11th. 2017.

Facilitating clinical application of new evidence based treatments in favor of today's patients, by decreasing the time gap, is a new, significant requirement in oncology. There is recent widespread literature concerning the lack of phase III traditional trials. The way to accelerate the process is to integrate clinical research and clinical practice. This approach can be better guaranteed by networks of cancer centres, such as the OECI, having a validated quality system and operating in collaboration with patients' associations and adopting standardized procedures such as has been proposed by the Biobanks and Molecular Pathobiology WG.

The complexity of clinical research is on such a high level that we need multidisciplinary approaches: oncologists with different experience have to work together with molecular pathologists, molecular biologists, radiotherapists, surgeons, epidemiologists, bioinformatics and other professionals to reach a critical mass of knowledge and experience. No doctor is able to keep in mind information related to hundreds or even thousands of genes and proteins and their complex pathways and interactions. There is the need to refer to a bioinformatics support system to compare patients' data with widespread databases

The continuous increase of health costs and the introduction of very expensive drugs will no longer be supported by the National Health Systems, therefore, new, and more effective molecular study of each patient and targeted protocols should be adopted. This means that the cost of the treatments should be balanced and justified by the social cost of the disease, and only a more effective application of the new

drugs to the patients can be an equitable solution. The N-1 approach is tackling all these aspects of oncology, taking patient consideration to the centre of any action.



N1 Trial Meeting OECI Pathology Day, Brno, June 21st - 2017

# Welcome to the Supportive and Palliative Care WG

Tiina Saarto

HYKS Syöpäkeskus (Helsinki University Central Hospital)

There is an increasing need for palliative care not only at end-of-life but throughout the cancer disease trajectory as cancer patients are getting older and they live longer with non-curable disease. Palliative care, as defined by the WHO, applies not only at the end of life but throughout cancer care.

A modern cancer care is a multidisciplinary teamwork with a holistic approach to better control the cancer disease and to better preserve quality of life of the patients and their families. The New OECI Working Group will work in that direction to help patients and their families to live their life as actively as possible with the cancer disease or the caused disabilities.

How can we manage the integration?

We shall collaborate with other European societies such as the European Association for Palliative care (EAPC), ESMO and ECCO, who all share the same vision. ESMO is accrediting Designated Centers of Integrated Oncology and Palliative Care and imposing specific requirements for the services offered. ECCO is performing quality cancer care guidelines with minimal requirements for cancer centres. EAPC have promoted the delivery of high quality palliative care by fostering palliative care research, policy, education and evidence-based practice. Together we can work out a common understanding about palliative care needs to offer a holistic cancer care for all patients.

I welcome you all to collaborate with "S&PC WG" to achieve this goal!



ONE MORE REASON TO JOIN THE OECI IS CERTIFYING YOUR QUALITY IN ONCOLOGY!

# The OECI participation in the Joint Action on Rare Cancers "JARC"

Paolo De Paoli and Lucia Da Pieve Centro di Riferimento Oncologico (CRO) Istituto Nazionale Tumori Aviano

JARC is a multi-stakeholder collaboration launched by the General Directorate of Health and Consumer Protection and involves 18 EU Countries. The Joint Action is coordinated by the Fondazione IRCCS Istituto Nazionale dei Tumori of Milan, and will run for 3 years (2016-2019). The JARC Consortium includes 34 partners, among them, Ministries of Health, Cancer Control Programmes' representatives, universities, public health institutions, population-based cancer registries, Cancer Institutes, patients' associations and several cancer societies/organisations.\*

The JARC project is composed of 10 work packages, and the OECI coordinates the WP5, "Assuring Quality of Care", which has the following tasks:

- to map the existing networks of care for all 11 families of adult rare cancers across all Member States and to identify gaps in current provision and inequalities of patient access;
- to propose consistent and Europe-wide systems-based standards for all families of rare cancers and the networks serving them.
- to design Quality Assurance systems or processes specific to rare cancers supplemental to the European Reference Networks – ERNs – requirements.\*\*

The OECI core team is composed of representatives of the Centro di Riferimento Oncologico of Aviano, the Netherlands Comprehensive Cancer Organisation, Utrecht, and the Cambridge Cancer Centre.

At the 2017 JARC General Assembly, held in Milan on October 16th, the results achieved by the WP5 have been presented.

In particular, a literary review on the effectiveness of Health Networks was performed, as well as a survey of Quality Assurance Systems (QASs) adopted by Cancer Hospitals/Institutes in several EU Member States.

Furthermore, the quality and scope of those QASs were analyzed, and a comparison to the European Reference Network for rare solid cancer of the adult compliance requirements was successfully completed.

The designing of the framework for the quality standards is in progress and will be completed during the 2<sup>nd</sup> year of the project.

An excellent job done by the OECI team!



Annual meeting of the JARC WP5 - Milan, October - 2017

### 6 New Members joined the OECI Membership

Giorgia Pesce and Patrizia Sommella SOS Europe

## 5 Cancer Centres joined the OECI during the last General Assembly held on June $22^{nd}$ in Brno.

The OECI is happy to welcome the New Full Members and is confident about their active collaboration and support in furthering participation with the OECI Accreditation and Designation Programme. The 5 centres have already expressed their willingness to contribute in the activities of the OECI Working Groups.

On November 20<sup>th</sup>, as a result of an Extraordinary General Assembly, the Candiolo Cancer Institute – FPO - IRCCS, (TO), Italy has also been admitted as New OECI Full Member.

www.ircc.it/irccit }



A warm welcome is also extended to the Candiolo Cancer Institute.

More information on the New Members is available via **www.oeci.eu/Membership.aspx** or can be found in the OECI Yearbook 2017-2018.

#### **Centre Jean Perrin**

www.cjp.fr France



#### **Institut Paoli-Calmettes**

www.institutpaolicalmettes.fr
France
INSTITUT PAOLI-CALMETTES

#### Trinity St. James's Cancer Institute

www.stjames.ie/cancer Ireland



#### **Uppsala University Hospital**

www.akademiska.se Sweden



#### **University Medical Center Groningen**



www.umcg.nl The Netherlands

**University Medical Center Groningen** 



Directors and Representatives of OECI Members at OECI39 in Brno.

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<sup>\*</sup> Source http://jointactionrarecancers.eu/Documents/Jarc%20brochure\_Final%20high.pdf

<sup>\*\*</sup> Source http://jointactionrarecancers.eu/index.php/assuring-quality-of-care

### **OECI 2017 Oncology Days Brno**

Dominique de Valeriola Institut Jules Bordet. Jan Zaloudik Masarvk Memorial Cancer Institute

Marking its 10th Anniversary, the annual convention of the Directors of the European Cancer Institutes took place in Brno, hosted by the Institute of Biostatistics and Analyses of the Masaryk University and the Masaryk Memorial Cancer Institute, a proud founding member of the OECI since 1979. The Institute has adopted the vision of the OECI and demonstrated its availability to serve the Organisation by its commitment to further improve cancer care and foster oncology science in Europe.

The productive 10th Edition of the Oncology Days has confirmed, once again, the important role of the OECI through its European network of Cancer Centres, having a unique critical mass of expertise and competences, which contribute to the production and dissemination of knowledge, so as to reduce fragmentation and increase competitiveness. These goals are being achieved by promoting and strengthening the concept of "comprehensiveness" and quality in cancer care throughout a wellstructured internal organization of cancer centres and networks.

The session on "Developing Quality Criteria for Comprehensive Cancer networks: what makes a great cancer network?" debated what the quality criteria are for effective patient centered cancer networks, which aim to provide sustainable care for all cancer patients, with the ultimate goal of finding new and better treatments, providing more comprehensive care and improving patient quality of life throughout the cancer care continuum, through evidence-based medicine. The very interesting pilot project of a cancer management model for a National Comprehensive Cancer Care Networking (CCCN), developed in the Czech Republic, was presented.

The 2017 Pathology Day has also been designed to interest oncologists, molecular biologists, epidemiologists, bioinformaticians. The N-1 trials approach was discussed and the set-up of a specific Consortium was supported as a suitable medium for further standardization of protocols on plasma DNA analysis and fixed and paraffin embedded tissues NGS Whole Exome Sequencing.

The Scientific Conference 2017 on "Rising cancer prevalence as emerging challenge for oncologists", hosted several lectures describing in detail the epidemiology, the precarious financial sustainability of care due to the increasing prevalence of cancer patients, the patient perspectives, how to best handle rare cancers and the benefit that may ensue from the recently launched projects on European Reference Networks and Joint Action on Rare Cancers.

The increasing interest of OECI to collaborate in specific actions focused on patient involvement, with a view to improving the quality of cancer care and research in the centres, was discussed during the launch meeting of the OECI WG on Collaboration for Good Practices with Patients, jointly organized with the European Cancer Patient Coalition.

The General Assembly closed the Oncology Days 2017 and the Board proposal to nominate Professor Thierry Philip as President Elect was unanimously accepted by the OECI Members. 5 new Full Members were welcomed into the OECI, increasing the membership to 81 Institutions; probably the biggest European Economic Interest Grouping "EEIG" existing in Europe.

The Gala Dinner, which took place on the magnificent, panoramic terrace of the Spielberg Castle, marked the end of the 10th Edition of the Oncology Days. Participants were entertained by a greatly appreciated, witty speech from our host, Professor Jan Zaloudik, full of historical innuendos about how the Moravians have developed an extremely open-mind over time and the warm welcome towards their

visitors was much appreciated by all attendees, throughout their stay in Brno.

This was followed by the sharing of a giant 10<sup>th</sup> Anniversary Oncology Days Cake, which closed the Gala Dinner. Just in time, ahead of a tempest worthy of a Midsummer Night's Dream, which sent participants scurrying for shelter after dessert.

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### The 40<sup>th</sup> OECI anniversary: welcome to Poznan

Julian Malicki Greater Poland Cancer Centre. Claudio Lombardo Organisation of European Cancer Institutes (OECI)

The year 2018 marks the 40th anniversary of the founding of the Organisation of European Cancer Institutes. The Greater Poland Cancer Centre (GPCC) is looking forward to hosting next year's special anniversary Event "2018 OECI Oncology Days" that will be held from June 20th to 22nd. We are certain that the Oncology Days participants will enjoy the opportunity of exploring our charming city, especially the old town, and perhaps find time to visit our Cancer Centre, which will celebrate its 65<sup>th</sup> Anniversary in 2018.

The GPCC is one of Europe's largest and most active comprehensive cancer centres. The hospital is staffed by more than 1100 health care professionals. Annually, the GPCC has more than 20,000 patient admissions, 160,000 outpatient visits, and 7000 surgeries are performed. Together with two satellite centres in Kalisz and Pila, we treat 6500 patients each year with radiotherapy, mainly external beam radiotherapy but also brachytherapy.

The GPCC is a thoroughly modern hospital offering the latest technology, including a state-of-the-art multi-room operating theatre, 9 linear accelerators, a Cyberknife and Tomotherapy system, and a full range of brachytherapy equipment. We provide most of the latest treatment techniques (except for proton therapy), including IGRT, IMRT, Tomotherapy, SBRT, radiosurgery, and hyperthermia. The GPCC also has a complete Conference Centre where training activities, scientific conferences, and symposiums are offered.

The GPCC is affiliated with Poznan University of Medical Sciences and many clinicians are also university professors. The GPCC is also home to the editorial offices of four international scientific journals: 1) Reports of Practical Oncology and Radiotherapy, 2) Letters in Oncology Science, 3) Contemporary Oncology and 4) Journal of Contemporary Brachytherapy.

We are very honoured to be hosting the upcoming OECI 40th Anniversary and the 2018 Oncology Days Event, The 2018 Scientific Conference themed **Emerging technologies** in Therapies against cancer: What best to select for cancer centres?, will focus on emerging technologies for cancer patients and cancer centres, as well as some tools for evaluating their cost benefits. Session 1 will look into the topic of Limiting Invasiveness of radiotherapy. Session 2 on Debating the Future of Hadrontherapy, Session 3 on Minimallyinvasive Technologies: pros and cons. and Session 4 will analyse and discuss about

On behalf of the OECI and the GPCC, we wish you a warm welcome to Poznan!



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### 7<sup>th</sup> EACR-OECI European Association for Joint Training Course: Molecular Pathology **Approach to Cancer**

Cancer Research (EACR). Giorgio Stanta Università degli Studi di Trieste

Kathryn Wass

Amsterdam, Netherlands: 8 - 10 May 2017

The OECI and the EACR (European Association for Cancer Research) have been working together to organise this widely acclaimed annual course on the "Molecular Pathology Approach to Cancer" since 2011. With a limited number of participants, expert speakers and dedicated networking sessions, it has become an important fixture in the conference calendar.

The 7th edition of the training course was held in Amsterdam from 8th-10th May 2017. Members of the Scientific Programme Committee included Richard Marais (UK), Jorge Reis-Filho (USA), Giorgio Stanta (Italy) and Marc van de Vijver (Netherlands). It was granted 12 European CME credits (ECMEC) by the European Accreditation Council for Continuing Medical Education (EACCME).

We welcomed 115 participants to the course this year, who enjoyed 3 days of interesting and exciting lectures from the 16 invited speakers. We awarded 9 EACR-ESMO Meeting Bursaries and 5 OECI

Meeting Bursaries to enable early career researchers to attend the course. The winners received a free registration and funds to support their travel.

In the feedback survey sent after the close of the course, participants gave a 100% satisfaction rating for the quality of the scientific content, with over half describing it as "Excellent".

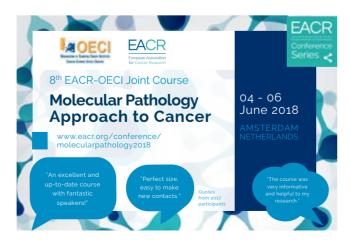
One participant commented: "In the fast moving field of molecular research, diagnostics and therapy it is almost impossible to maintain a view on the bigger picture. This meeting helps with acquiring this, without losing itself in too much detail."

Another told us: "It's a good course both for pathologists who don't have very specific skills and for pathologists and molecular biologists who currently work on molecular biology. Good update and overview on the most recent advancement on the most frequent and less frequent solid tumours."

The next edition of the course will be held in Amsterdam from 4th-6th June 2018. We hope to see you there!



The six winners of the OECI 2017 bursaries with the Members of the Scientific Programme Committee.



#### The European School of Oncology "ABC Global Alliance" Extract from the Beishon and published Oncology http://bit. Extract from the full article written by Marc Beishon and published in the European School of Oncology's Cancer World magazine http://bit.ly/cw80-ABC-advocacy

The past 10 years have seen a steady uptick in focus on the unmet needs of people with metastatic breast cancer (mBC), which have grown all the more urgent due to the stalling progress in survival. Milestones include the ABC consensus meeting on advanced breast cancer, launched by the European School of Oncology (ESO) in 2011 (www.abc-lisbon.org); the publication of the 'Global status of advanced/ metastatic breast cancer 2005-2015 decade report' (bit.ly/decade report); and most recently the establishment of the ABC Global Alliance (www.abcglobalalliance.org), another ESO initiative, which draws together organisations with interests in advanced breast cancer, and which will elect its first steering committee members at ABC4 in Lisbon in November 2017.

The ABC Global Alliance has set out a Global Charter of 10 achievable and measurable actions for the next 10 years which the advanced breast cancer community is united to fight for. The aim is to double median survival from the current two to three years, up to four to six years by 2025.

#### The ABC Global Charter: 10 actions for change

The ABC Global Charter lists 10 actions that are priorities for change. The full wording is available on the Alliance website – **www.abcglobalalliance.org** – explains and expands on the actions.

- Double median overall survival for patients with ABC to at least four years by 2025.
- Improve quality of life for patients with ABC in clinical practice.
- Improve availability of robust epidemiology and outcomes data for ABC.
- Increase availability and access to multidisciplinary care, including palliative, supportive and psychosocial assistance for patients, families and caregivers to ensure patients are receiving the best treatment experience.
- Strive for all patients with ABC to have financial support for treatment, care and assistance if unable
- Offer communication skills training to all healthcare providers.
- Provide accurate and up-to-date ABC-specific information tools to all patients who want them.
- Increase public understanding of ABC.
- Improve access to non-clinical supportive services for ABC.
- Protect workforce rights for patients with ABC.

#### Join the ABC Global Alliance!

The ABC Global Alliance is for people and organisations who are committed to developing, promoting and supporting tangible improvements that will ultimately create awareness and actions that will improve and extend the lives of patients living with ABC worldwide.

To apply for membership go to the Partners and Supporters page of www.abcglobalalliance.org or contact Roberta Ventura at ABCGlobalAlliance@eso.net





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# Comprehensive and Cambridge Cancer Centre, Wim van Harten Rijnstate Hospital Cancer Care: Accreditation and Designation of Cancer Care Networks

Throughout Europe the debate about organizing optimal care pathways is entering a new stage. Variations in specialist care provision, volume-outcome relationships, and differences in long term survival rates fuel this discussion, although most cancer patients are still being treated in a general hospital setting. In several European countries clinical audit systems are starting to generate more evidence on how to organize optimal cancer service provision. Government agencies and professional societies are actively defining quality criteria and, increasingly, minimum volume numbers. Quality assurance and accreditation systems are being used to further improve the care system. The OECI, thanks to experience acquired with the Accreditation and Designation Programme, feels that there is room for improvement in the organization of specialist cancer care.

There is not much debate on the need for multidisciplinarity in specialist cancer care provision for the individual patient, but exactly how this should be structured for groups of patients and at a population level is an important issue. The concept of focusing significant volumes of care in cancer centers, either within hospitals or as freestanding entities is gaining ground in Europe. In addition "comprehensiveness", as a structure to channel translational research and medicine in oncology, is an important and separate concept in the cancer field, whereas the wording "comprehensive" is often also used to specifically describe the multidisciplinary, holistic approach to cancer care provision. So we have a confusion of terminology.

In some countries (such as Italy, Czech Republic and the Netherlands) cancer networks are presented as a way of meeting the performance challenge and in a way challenge further centralization in cancer centers. Although patients seem to be increasingly prepared to travel for specialist care, a large proportion of patients strongly prefer to be treated as near to their home as possible. This presents a special tension in respect of rare cancers.

In a number of recent European Joint Actions – such as that on Rare Cancers, and also in the INTENT project, approved in the framework of the INTERREG Central Europe Programme, there is a focus on defining quality standards for various kinds of networks, and yet there is a lack of definition of what constitutes a network, and what the quality marks of governance of such networks are. The OECI is involved in all of these European projects as either leader or participant. As part of these involvements we have reviewed the academic literature, which we find to be surprisingly thin on the question; "what are the marks of a really effective health network?" Most of the published evidence comes from Australia and the UK. On the other hand, there is also surprisingly little hard evidence on the added value of providing cancer care in (comprehensive) cancer centers.

In particular there is lack of clarity on the governance and the organization which would create and enhance truly Comprehensive Cancer Networks which encompass care, education and research. Then there is the geographical challenge. Some cancer networks can be seen on a sub-regional basis (the UK and France have had these for many years); some on a very local level (e.g. in Paris or London); others for rare cancers are at a national level (see the recent rare cancer network creation in Italy) or international level (EURACAN, Eurobloodnet and PaedCan). These different geographical challenges, and the concepts of "networks within networks" merit informed debate as we move forward as a cancer community to define quality standards and criteria for cancer networks.

In order to stimulate a debate on the above topics and provide material to define a position, an OECI invitational Consensus meeting will take place in Paris on 19<sup>th</sup> April 2018, kindly hosted by the Institut Curie. Quality criteria, effectiveness and patient centeredness of different types of Cancer Networks and their relation with Cancer Centers will be discussed. Ultimately this should lead to a decision of the OECI whether or not to expand our Accreditation & Designation Programme to Comprehensive Cancer Networks which meet certain quality criteria.

This meeting is open to OECI Member Organisations to send up to two representatives. OECI will also invite other key Organisations, particularly patient bodies, and those presenting case studies. Further details of the meeting will be sent directly to OECI members. OECI makes no charge for participating in this meeting, but representatives will pay for their own travel and accommodation. Expressions of interest should be sent to Claudio Lombardo at <code>oeci@oeci.eu</code>



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## 7 Members certified at the last OECI General Assembly

**Marjet Docter** Netherlands Comprehensive Cancer Organisation (IKNL),

Claudio Lombardo

Organisation of European Cancer Institutes (OECI)

Throughout 2017 many OECI Member cancer centres worked hard on their quality improvement programmes by using the OECI A&D Standards. During the yearly OECI General Assembly in Brno (June 23<sup>rd</sup> 2017) 7 Members received their OECI Certificates: the three Portuguese cancer centres have been certified for the second round, the so called "re-accreditation".

#### List OF Members certified in 2017

#### **Comprehensive Cancer Centes**

- Istituto Clinico Humanitas, Milan Italy
- Oslo Universitetssykehus, Oslo Norway
- Centre Léon Bérard, Lyon France
- IPO Francisco Gentil, E.P.E. Porto Portugal (2<sup>nd</sup> round)



#### **Clinical Cancer Centre**

- Masaryk Memorial Cancer Institute, Brno Czech Republic
- IPO Francisco Gentil, E.P.E. Coimbra Portugal (2<sup>nd</sup> round)
- IPO Francisco Gentil, E.P.E. Lisbon Portugal (2<sup>nd</sup> round)



We would like to congratulate the centres for this impressive achievement!

Working on quality improvements is an ongoing effort. The overview below shows the centres that will be certified during the OECI General Assembly in June 2018 or will have their peer reviews conducted in 2018

- NKI, Amsterdam The Netherlands (2<sup>nd</sup> round)
- AZ Groeninge, Kortrijk Belgium
- Anadolu Medical Centre Hospital, Istanbul Turkey
- Oncology Institute "Prof.Dr. Ion Chiricuta", Cluj Romania
- National Cancer Institute, Budapest Hungary (2<sup>nd</sup> round)
- Fundacion IVO, Valencia Spain (2<sup>nd</sup> round)
- Institut Jules Bordet, Brussels Belgium (2nd round)
- Institute of Oncology Vilnius University Lithuania (2<sup>nd</sup> round)
- The Christie NHS Foundation Trust, Manchester UK (2<sup>nd</sup> round)
- Institut Curie, Paris France
- Turku University Hospital Cancer Centre, Turku Finland
- Tampere Cancer Centre, Tampere Finland

More than 50% of the OECI Members have already been certified or re-certified. A complete overview may be found at <a href="https://www.oeci.eu/accreditation">www.oeci.eu/accreditation</a>

# A milestone for the OECI A&D journey: Cambridge the ISQua Accreditation

**Marjet Docter** Netherlands Comprehensive

Cancer Organisation (IKNL). Simon Oberst

Cambridge Cancer Centre



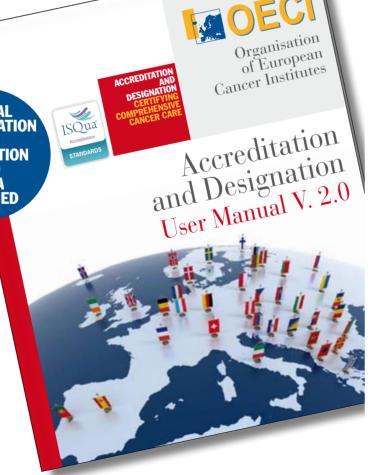
The OECI received the award for its Second Edition of the OECI standards from the International Society for Quality in Health Care (ISQua).

The accreditation programme of the ISQua provides assurance that the standards used by OECI to survey the performance of health care organisations meet the highest international benchmarks for accreditation entities. ISOua's mission is to inspire, promote and support continuous improvement in the safety and quality of health care worldwide. It features a network that spans 100 countries and five continents.

The ISQua recognition, an independent professional review of our Organisaton, is a milestone for the OECI Accreditation and Designation Programme validating that our standards are comprehensive and providing credibility to the quality assurance of our approach. The chair of the Accreditation and Designation Board, Simon Oberst, said:

"The ISQua Accreditation MANUAL ACCREDITATION is a tribute to the hard AND DESIGNATION work of many people in OECI over the last ISQUA CERTIFIED decade. The current and future members of our OECI A&D Programme can have confidence that our accreditation processes are robust and give a true and fair view of our Cancer Centres, and that we are the only Organisation which can provide this independent assurance of comprehensive cancer care for our patients throughout Europe."

More information about the OECI Accreditation Programme: www.oeci.eu/accreditation



#### www.oeci.eu



The OECI is aware of the importance of increasing the participation of the Russian Cancer Centres with the programmes of our Organisation. In order to attract our Russian colleagues. and upon decision of the OECI Board. the OECI website is also released in the Russian version.

Организация европейских онкологических институтов (OECI) осознает важность активного **участия** Российских онкологических центров в программах нашей Организации. С целью привлечения наших российских коллег, согласно решению Совета ОЕСІ, веб-сайт OECI www.oeci.eu теперь также выпущен на русском язык.

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