

# INNOVATIVE PARTNERSHIP FOR ACTION AGAINST CANCER (iPAAC)

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## **GENERAL INFORMATION**



- The Innovative Partnership for Action Against Cancer (iPAAC) Joint Action, which has been selected for funding under the Third Health Programme (2014–2020), brings together 44 partners from 24 European countries.
- It aims to build upon the outcomes of previous EPAAC and CANCON Joint Actions and is coordinated by the National Institute of Public Health of the Republic of Slovenia (NIJZ).
- The iPAAC Joint Action has officially started on 1st April 2018 and will last for three years.

## **iPAAC BUDGET:**

- 5.625.000 EUR
- **4.500.000** EUR co-funding by EC (80 %)

## **iPAAC STRUCTURE**



Innovative Partnership for Action Against Cancer (iPAAC) is the third consecutive Joint Action dedicated to cancer control.

## **IPAAC WORK PACKAGES:**

WP 1 - Coordination - National Institute of Public Health of Slovenia (NIJZ)

WP 2 – Dissemination – Institute of Health Information and Statistics of the Czech Republic (UZIS)

WP 3 – Evaluation – Croatian National Institute of Public Health (HZJZ)

WP 4 – Integration in National Policies and Sustainability – Belgian Cancer Centre, Sciensano (SC)

## **iPAAC STRUCTURE**



WP 5 - Prevention and Screening - THL - Cancer Society of Finland (CSF)

WP 6 – Genomics in Cancer Control and Care – Belgian Cancer Centre, Sciensano (SC)

WP 7 – Cancer Information and Registration – Italian National Institute of Public Health (ISS)

WP 8 – Challenges in Cancer Care - Catalan Institute of Oncology (ICO)

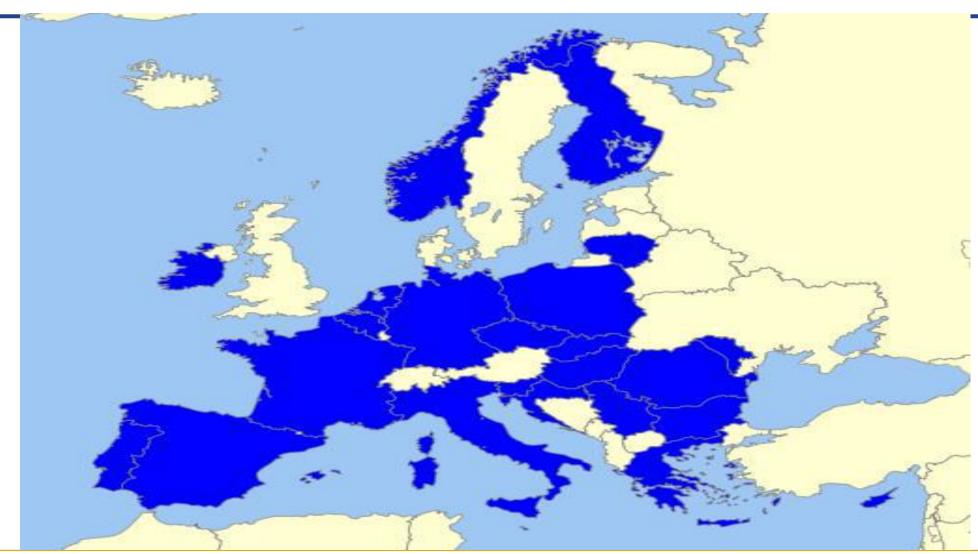
WP 9 – Innovative Therapies in Cancer – French National Institute of Cancer (INCa)

WP 10 -Governance of Integrated and Comprehensive Cancer Care - German Federal Ministry of Health and German Cancer Society (DKG)



# **IPAAC PARTNER COUNTRIES**







# iPAAC PARTNERS – COMPETENT AUTHORITIES



1. (Coordinator)	National Institute of Public Health of the Republic of Slovenia (NIJZ)	Slovenia
2.	Sciensano (SC)	Belgium
3.	National Center of Public Health and Analyses (NCPHA)	Bulgaria
4.	Croatian Institute of Public Health (CIPH)	Croatia
5.	Ministry of Health of the Republic of Cyprus (MOH)	Cyprus
6.	Institute of Health Information and Statistics of the Czech Republic (UZIS)	Czech Republic
7.	National Institute for Health and Welfare (THL)	Finland
8.	French National Cancer Institute (INCA)	France
9.	Federal Ministry of Health (BMG)	Germany
10.	7th Health Region of Crete (7 HRC)	Greece
11.	National Institute of Oncology (OOI)	Hungary
12.	Department of Health (DoH)	Ireland

# iPAAC PARTNERS – COMPETENT AUTHORITIES



13.	National Institute of Health (ISS)	Italy
14.	Ministry of Health of the Republic of Lithuania (SAM)	Lithuania
15.	Ministry for Health – Government of Malta (MFH)	Malta
16.	Institute of Oncology of the Republic of Moldova (IMSP IO)	Moldova
17.	National Institute for Public Health and The Environment (RIVM)	Netherlands
18.	Oslo University Hospital (OUS)	Norway
19.	National Institute of Public Health – National Institute of Hygiene (NIZP – PZH)	Poland
20.	Ministry of Health of Portugal (MS)	Portugal
21.	National Institute of Public Health (INSP)	Romania
22.	Institute of Public Health of Serbia "Dr Milan Jovanović Batut" (IPHS)	Serbia
23.	Biomedical Research Center of the Slovak Academy of Sciences (BMC SAS)	Slovakia
24.	Catalan Institute of Oncology (ICO)	Spain

# iPAAC PARTNERS – AFFILIATED ENTITIES



1.	Institute of Oncology Ljubljana (OIL)	Slovenia
2.	Masaryk University (MUNI)	Czech Republic
3.	Cancer Society of Finland (CSF)	Finland
4.	German Cancer Research Center (DKZF)	Germany
5.	German Cancer Society (DKG)	Germany
6.	<ul> <li>Technical University Dresden (TU Dresden)</li> <li>Chair of Information Systems, esp. Systems Development</li> <li>Centre for Evidence-based Healthcare</li> </ul>	Germany
7.	University Medicine Köln (UK Köln)	Germany
8.	Italian Ministry of Health (MoH)	Italy
9.	Vilnius University Hospital Santaros Klinikos (VUHSK)	Lithuania
10.	"Marius Nasta" Pneumophtisiology Institute (IPMN)	Romania
11.	Oncology Institute "Prof. Dr. Ion Chiricuţă" (IOCN)	Romania



# iPAAC PARTNERS – AFFILIATED ENTITIES



12.	Emergency Clinical County Hospital Craiova (CCHC)	Romania
13.	Clinical Centre of Kragujevac (CCK)	Serbia
14.	Faculty of Medicine, University of Belgrade (UBEO)	Serbia
15.	Institute for Oncology and Radiology of Serbia (IORS)	Serbia
16.	Public Health Institute Niš (IPHN)	Serbia
17.	Institute of Public Health of Vojvodina (IPHV)	Serbia
18.	Oncology Institute of Vojvodina (IOV)	Serbia
19.	Provincial Secretariat for Health Care (APV)	Serbia
20.	Foundation for the Promotion of Health and Biomedical Research of Valencia Region (FISABIO)	Spain

# **TARGET GROUP**



- The primary target group of the iPAAC Joint Action will be policymakers at the EU level and decision makers at the national, regional and local level.
- All of the innovative actions covered by the JA work packages will be assessed on the basis of sustainability and integration into national policies.

# GENERAL OBJECTIVE OF THE IPAAC JOINT ACTION



The general objective of the iPAAC Joint Action (JA) is to develop innovative approaches to advances in cancer control.

The development of innovative approaches to cancer control will be supplemented by a Roadmap on Implementation and Sustainability of Cancer Control Actions, which will support Member States in implementation of iPAAC and CANCON recommendations.

Roadmap on Implementation and Sustainability of Cancer Control Actions is the key deliverable of the Joint Action.



## **WP 5 – PREVENTION AND SCREENING**



## **Cancer Society of Finland (CSF)**

### 1. WP OBJECTIVES

- Strategies for early detection of cancer
- Effective solutions for population-based screening programmes
- Cancer prevention & health promotion: implementation of the European Code Against Cancer
- Inequality a cross-cutting theme integrated in above mentioned tasks

### 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions in the field of cancer prevention
- Survey on perceptions of attitudes on European level (4-6 countries)
- Report of innovations, including harms and benefits from risk-stratified screening
- Review of ECAC recommendations, based on expert groups

## 3. INVOLVEMENT OF COLLABORATING PARTNERS



# WP 6 – GENOMICS IN CANCER CONTROL AND CARE



## **Belgian Cancer Centre – Sciensano (SC)**

### 1. WP OBJECTIVES

To develop a comprehensive approach to the use of genomics in cancer control and care.

### 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions in the field of genomics
- Launch of expert working groups
- Symposium on Genomics in Cancer Control and Care

## 3. INVOLVEMENT OF COLLABORATING PARTNERS



# WP 7 – CANCER INFORMATION AND REGISTRATION



## Italian National Institute of Public Health (ISS)

### 1. WP OBJECTIVES

- To advance current registries datasets
- To expand information available from current registries datasets

### 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions in the field of cancer information and registries
- Workshops to discuss results of the survey and to agree on protocols of pilot studies and prevalence study
- Pilot data sources integration and data collection completed by the CRs
- Workshops to agree on results of pilot studies and of prevalence study

## 3. INVOLVEMENT OF COLLABORATING PARTNERS



## **WP 8 – CHALLENGES IN CANCER CARE**



## Catalan Institute of Oncology (ICO)

#### 1. WP OBJECTIVES

The aim of the work package is to define strategies to improve the quality of cancer care by optimising the use of healthcare resources and promoting realistic and evidence-based responses to existing needs.

#### 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions in the field of cancer care
- Methodology of evaluation of reimbursement of complex surgery and radiation oncology, with a map of the pros and cons
  of different approaches completed
- Workshop on reviewing experience on reorganization of therapy care for pancreatic cancer
- Identification of desirable features of quality improvement efforts aimed at tackling low value cancer care

## 3. INVOLVEMENT OF COLLABORATING PARTNERS



# WP 9 – INNOVATIVE THERAPIES IN CANCER



## French National Institute of Cancer (INCa)

#### 1. WP OBJECTIVES

- Map existing guidelines and reference frameworks regarding the use of immunotherapies in clinical practices and identify potential off-label
  use
- Identify and validate predictive biomarkers for response, resistance or toxicity
- Identify and predict impact of forthcoming innovative treatments (horizon scanning activities)
- Identify tools that could be implemented in Europe for real-life monitoring of innovative treatments

#### 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions in the field of innovative cancer therapies
- 1st draft of the mapping of national guidelines and reference frameworks of clinical practices with regards to innovative therapies
- 1<sup>st</sup> draft of mapping of existing national guidelines with biomarkers used in clinical routine and on identifying new biomarkers in "Horizon Scanning" existing systems
- 1st draft of common European tools for a real-life monitoring of selected immunotherapies

### 3. INVOLVEMENT OF COLLABORATING PARTNERS



# WP 10 – GOVERNANCE OF INTEGRATED AND COMPREHENSIVE CANCER CARE



## German Federal Ministry of Health and German Cancer Society (DKG)

#### 1. WP OBJECTIVES

- The goal of this Work Package is to further develop **practical instruments** ensuring a standardised integrated and comprehensive oncological care in all European Member States that is tumour-specific and delivers all-encompassing high-quality care to all patients.
- Practical instruments that will be developed:
  - Methodology for implementing <u>patient pathways</u> in CCCN's and deriving <u>quality indicators</u>; Framework for the implementation of <u>PRO's</u> in CCCN's; Catalogue of requirements for the set up of <u>Comprehensive Cancer Care Networks (CCCN's</u>),
- These instruments will be evaluated in 2 pilot-sites and should be used by NCCPs for the governance of oncological care.

#### 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions in the field of governance of integrated and comprehensive cancer care
- Kick-off meeting where CCCN pilot sites will be established (07.05.2018, Pilot sites: ower Silesian Oncology Centre, Wroclaw, Poland and Charité, University Medicine Berlin, Germany)
- Generic and tumour-specific requirements for the setup of CCCN's are defined
- Standardised Methodology to derive QI and a set of QI's for the use in CCCN's is agreed

#### 3. INVOLVEMENT OF COLLABORATING PARTNERS



## **WP 2 – DISSEMINATION**



## Institute of Health Information and Statistics of the Czech Republic (UZIS)

### 1. WP OBJECTIVES

- Identification of relevant target groups, networks and audiences and setting up effective dissemination strategy and communication pathways
- To develop iPAAC web portal and reporting tools
- Optimization and implementation of specific communication channels and content for defined target groups

### 2. KEY DELIVERABLES & MILESTONES

- Leaflet
- Website
- Dissemination strategy
- Layman version of final report
- 3. INVOLVEMENT OF COLLABORATING PARTNERS
- 4. KEY ISSUES TO BE DISCUSSED WITH COLLABORATING PARTNERS

## **WP 3 – EVALUATION**



## **Croatian National Institute of Public Health (HZJZ)**

#### 1. WP OBJECTIVES

- to check that the quality of the JA outputs is high and that they serve their purpose, i.e. are useful to their target groups
- that the JA has reached its general and specific objectives and has had the desired impact on the specified target groups

#### 2. KEY DELIVERABLES & MILESTONES

- Evaluation strategy
- Interim evaluation report
- Final Evaluation Report
- Evaluation Strategy finalised
- Workshop on Impact and Sustainability held

### 3. INVOLVEMENT OF COLLABORATING PARTNERS



# WP 4 – INTEGRATION IN NATIONAL POLICIES AND SUSTAINABILITY



## **Belgian Cancer Centre – Sciensano (SC)**

## 1. WP OBJECTIVES

 To ensure the (timely) development of the (high quality) key deliverable: « the Roadmap on Implementation and Sustainability of Cancer Control Actions" (support MS in implementing iPAAC and CANCON recommendations)

## 2. KEY DELIVERABLES & MILESTONES

- Roadmap on Implementation and Sustainability of Cancer Control Actions
- Report on the Integration in national policies and sustainability

## 3. INVOLVEMENT OF COLLABORATING PARTNERS



## **iPAAC OUTCOMES**



- Support for Member States in implementing recommendations from the CANCON Joint Action at national, regional and local levels.
- Reinforcing of cancer prevention through a review of current recommendations for cancer screening and a sound assessment of the potential that might exist for the introduction of possible new screening programmes, through a critical evaluation and assessment of the impact the activities in the field of genomics may have on improving cancer control both at the population level and through assessment of the implementation and potential modifications of the European Code Against Cancer.

## **iPAAC OUTCOMES**



- Providing better efficacy for dealing with neglected cancers through development of new key indicators to assess clinical patient pathways and health care related costs of cancer and its interventions, particularly in the case of pancreatic cancer.
- Supporting the introduction of immunotherapies into clinical practice through a comprehensive assessment of immunotherapies and their effectiveness.
- Evaluation of cancer care in European countries through an assessment of quality indicators.
- Support for policymakers in the field of governance, including pilot comprehensive cancer care networks and an updated analysis of national cancer control programmes in the EU.

## CONTACTS



## **Project management team**

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## **Dissemination team**

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# **THANK YOU!**