EUnetCCC Engagement Pathways

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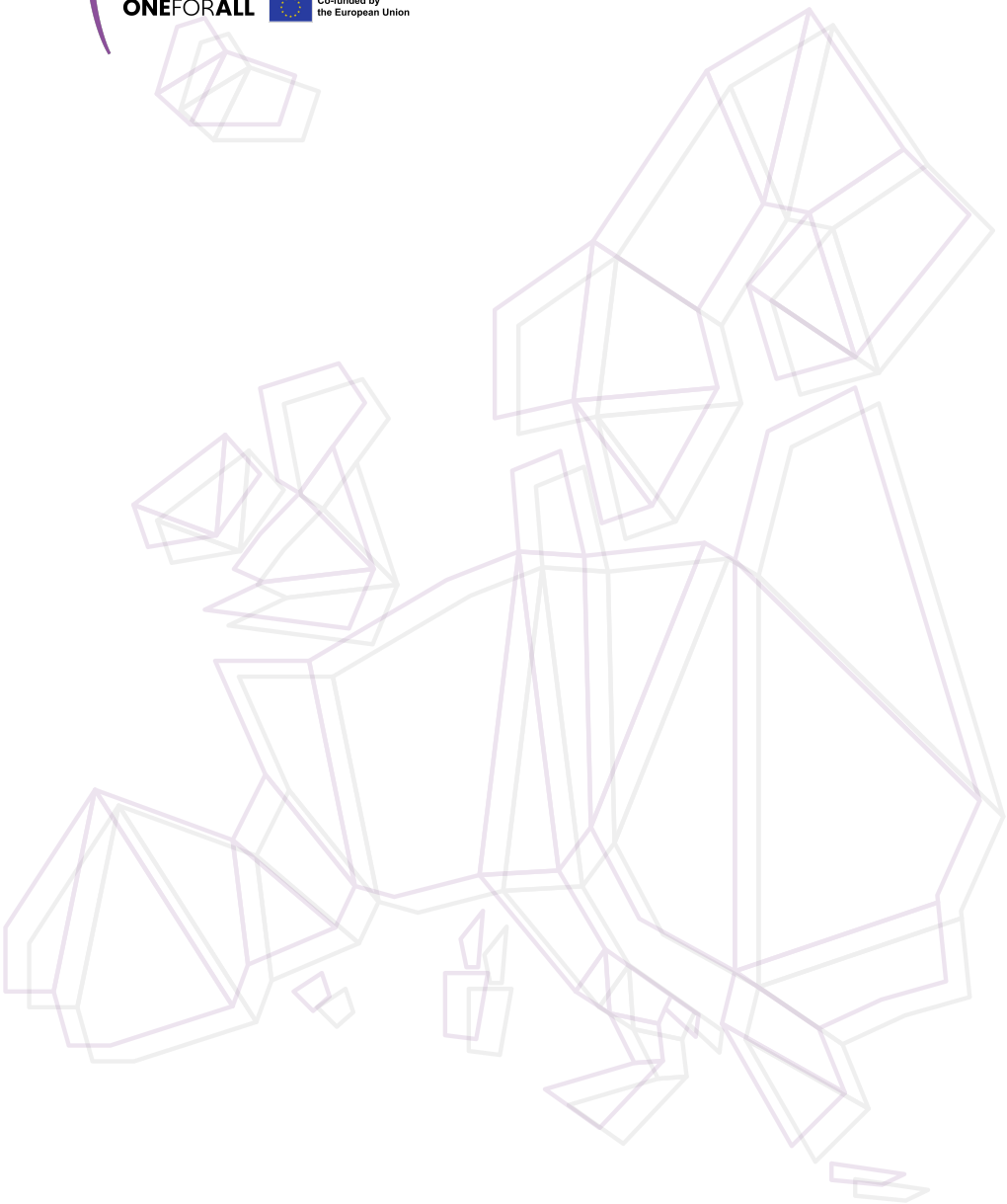

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ABBREVIATIONS AND ACRONYMS

AI	Artificial Intelligence
CA	Competent Authority
CC	Cancer Centre
CCB	Cancer Centre Board
CCC	Comprehensive Cancer Centre
CCCN	Comprehensive Cancer Care Network
CPD	Continuous Professional Development
DAC	Designation and Admission Committee
DKH	German Cancer Aid (Deutsche Krebshilfe)
EBCP	Europe's Beating Cancer Plan
EHR	Electronic Health Record
EoI	Expression of Interest
ERN	European Reference Network
EU	European Union
EUCCC	European Comprehensive Cancer Centre
FAQ	Frenquently Asked Questions
GA	Grant Agreement
GDPR	General Data Protection EU Regulation
ICT	Information and Communication Technology
IMC	Interim Membership Committee
INA	Interim Network Assembly
IT	Information Technology
JA	Joint Action
KPI	Key Performance Indicator
MD	Doctor of Medicine
MDT	Multidisciplinary Team
MRI	Magnetic Resonance Imaging
MS	Member State
MTB	Molecular Tumour Board
NGO	Non-Governmental Organization
OECI	Organisation of European Cancer Institures
PDCA	Plan-Do-Check-Act
PI	Principal Investigator
Q&A	Questions & Answers
R&D	Research and Development
RT	Radiation Therapy
SAB	Scientific Advisory Board
SOP	Standard Operating Procedure
SoS	Set of Standards
TTO	Technology Transfer Office
WHO	World Health Organization
WP	Work Package

TABLE OF CONTENTS

Overview 6
Of the 3 engagement Pathways

1 Pathway #1 10
Certification Pathway & Capacity-building

- The EUCCC certification 11
- Added value of the certification 13
- Capacity Building 14
- Activities 16
- EUCC Certification FAQ

2 Pathway #2 20
Joining the EU Network of CCCs

- The EU Network of CCCs 21
- Membership in the Network 23
- Network activities 26
- Network FAQ 28

3 Pathway #3 30
Becoming a Comprehensive Cancer Care Network

- Implemeting CCCNs 31
- Understanding CCCNs 33
- CCCNs FAQ 34

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OVERVIEW

Of the 3 engagement Pathways

ENGAGEMENT PATHWAYS

– 3 engagements paths are available*:

1

I want...

To be an EUCCC certified centre.

Am I eligible?

I am eligible if I am designated by my country's Competent Authority and approved by the DAC.

What is the process?

Once designated and approved by the DAC, I must follow the certification pathway steps.

2

I want...

To join the EU Network of CCCs.

Am I eligible?

If I am a member of the JA and meet one of the 4 admission criterias.

What will my rights be?

As a member, I will have rights, but also the duty to remain an active member and respect the Network's rules.

3

I want...

To become a Comprehensive Cancer Care Network (CCCN).

Am I eligible?

If I am a cancer centre / cancer network / a CCC that is meeting the CCCN Set of Standards, I may apply and test my eligibility to become a certified CCCN.

What is the process?

If I am an eligible CCCN, I must follow the steps of the certification pathway

*You can complete one or several of these pathways.

1 Certification application and self-assessment

I run the online self-assessment to check if I meet the EUCCC standards and I submit my application for quality assurance review.

2 On-site audit

If my application is validated, I prepare for the on-site visit. If my application is not validated, I can receive support through capacity-building.

3 Reporting and Improvement plan

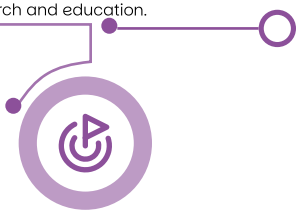
Based on the audit findings, I develop and submit an improvement plan for my centre.

4 Certification attribution

After the final review, the Certification Board issues a decision for certification attribution to my centre.

What do I get?

- Continuous support throughout the certification pathway.
- Access to resources via the EU Network of CCCs.
- Coordination, visibility, funding opportunities and benefits.
- Foster a shared EU ambition for care, research and education.



1 Shape the Network's work

Define thematic groups and appoint chairs.
Set the meeting calendar.
Revise interim procedures.
prepare the roadmap toward the Network Statute.

2 Help build the future model

Publish the second Call for Interest
Refine the future governance model if needed.
Draft a Code of Conduct for later approval.

3 Join and vote in the INA

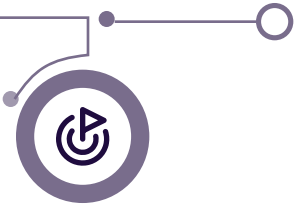
Nominate/elect the INA President.

4 Gain visibility and recognition

Formal acknowledgement of membership and inclusion in Network communications.

What do I get?

Access to Activities provided by WP8 of the JA, designed to foster exchange, learning, and innovation.



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3 On-site audit

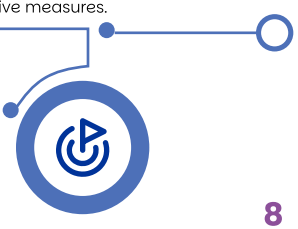
If my application is validated, I prepare for the on-site visit. If my application is not validated, I can receive support through capacity-building.

2 Setting up the CCCN

Use capacity building offers and training tools that are available to prepare for audit.

What do I get?

- Access to resources via EU Network of CCCCs.
- Improve collaboration and cooperation amongst network partners.
- Quality of care in CCCN will be assessed and continuously improved through joint evaluation with auditors and targeted corrective measures.



Introduction

A central element of the EUnetCCC Joint Action is the development of a European certification system for Comprehensive Cancer Centres (CCCs), which ensures that centres operate according to harmonised standards of excellence. Certification provides external validation, facilitates mutual recognition across Member States, and supports centres in their continuous improvement efforts, thereby contributing to the long-term goals of the Europe's Beating Cancer Plan.

The EUCCC Certification is a robust, EU-wide certification scheme aligned with EU Regulation – the first of its kind for CCCs. It is based on criteria and standards across seven domains: care, research, integration research & care, education and training, innovation, prevention, and governance.

To foster meaningful and continuous improvement for care teams and cancer patients, the EUCCC Certification needs to be fair to smaller EU countries, respectful of existing certification schemes in Europe and embedded in national realities.

The EUCCC certification introduces a clear and structured pathway. Candidate centres will be invited to apply for the certification through a designation process alongside National Competent Authorities. The entire certification process is likely to take 18 to 24 months.

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PATHWAY #1

Certification Pathway & Capacity-building

THE EUCCC CERTIFICATION

Pathway to certification

Candidate centres designated by their National Competent Authorities will be invited to apply for the EUCCC certification through an online self-assessment, leading to an onsite audit and the certification attribution. This certification aims to foster excellence through a continuous improvement approach.

1 Designation Process • 3 waves

Decision from the Designation and Assessment Committee

During the Joint action, countries are requested to designate candidate centres for the EUCCC Certification. Eligibility is based on clear and transparent admission criteria and will be confirmed by a Designation & Assessment committee

What you need to do as a designated centre:

- Create your account in the online tool (e-tool) and complete your profile.
- Fill out the application form with basic information about your centre (structure, governance, activities).
- Appoint a Centre Coordinator and a Project Team Leader.

What you get:

- Access to public documentation: criteria, glossary, obligations, user-guide
- Initial feedback from the Program Coordinator.
- A decision from the Certification Board:
  - If approved→ you can move to the next step
  - If not approved → you are provided with detailed explanation and orientation to capacity-building activities before re-submitting.

2 Certification application including online self-assessment • 6 to 11 months

Quality assurance review

Final Go / No-go to on-site audit

What you need to do:

- Set up a project team (4–5 people) to manage the process.
- Develop an internal plan (timeline, evidence collection).
- Complete the detailed self-assessment in the e-tool:
  - Answer each required criterion.
  - Attach required documents.
  - Explain gaps and planned improvement actions.
- Declare any conflicts of interest for the audit team composition.

What you get:

- Full access to the e-tool (forms, guides, templates).
- Quality Assurance Review: technical completeness & sufficiency of your application.
- Go/No-Go decision:
  - If Go → you can prepare for the on-site audit.
  - If No-Go → you are provided with detailed feedback & orientation to capacity building activities before reapplying.

Reading key: Validation gates | Link to capacity building activities

The process is punctuated by four decision checkpoints to ensure readiness, impartiality and quality, and it is designed to be iterative and supportive.

The estimated timings presented are indicative for **the complete certification process**. It does not take into account exceptional statuses (e.g. OECI / DKH certified CCCs) for whom the certification steps may differ in tasks and completion time.

3 On-site audit, Reporting and Improvement plan · 2 to 4 months

What you need to do:

- Finalize the visit agenda with the coordinator and lead auditor.
- Prepare logistics: rooms, document access, staff availability.
- Participate in interviews and observations during the visit.
- Review the draft audit report (factual check).
- Develop and submit a 12–24 month improvement plan in the e-tool.

What you get:

- A closing meeting with a verbal overview of findings.
- Confirmation of next steps (report, improvement plan).
- The final audit report validated by the audit team.
- Formal advice on areas to strengthen (without technical consulting).

4 Certification attribution · 1 to 2 months

Final review validation & Certification Board decision

What you need to do:

- Respond promptly if clarifications are requested before the final decision.

What you get:

- Certification Board decision:
  - If positive, you are certified → you receive an official letter and a attend ceremony within 3 months.
  - If negative, you are not certified → you receive a letter with reasons and reapplication guidance.

5 Follow-up and Improvement plan implementation · once EUCCC certified

What you need to do:

- Submit a 12-month progress report on your improvement plan.
- Provide an annual report every December (indicators, innovations).
- Prepare for renewal: start the new process within 18 months before expiry (certificate validity: 5 years).

What you get:

- Feedback from the coordinator and Board after each report.
- Option for intermediate self-assessments to track progress.
- Continued access to the network and improvement resources (webinars, tools, peer exchange).

ADDED VALUE OF THE CERTIFICATION

What makes the EUCCC Certification stand out for you as a centre?

1 Accessing resources via the EU Network of CCCs (knowledge, expertise-sharing, cross-border collaborations):

- **Providing tools** to structure care pathways
- Participating in **common research projects**
- **Sharing patient management** and guideline IT support tools

2 Promoting continuous quality improvement, with clear benefits in terms of:

- **Coordination** (encouraging team collaboration, different sizes of centres, working together, providing tools to structure care pathways, etc.)
- **Visibility** (more attractive to healthcare professionals and pharmaceutical companies to host clinical trials)
- **Funding** opportunities

3 Fostering a shared EU ambition, for more equity in patient access to high-quality care, supporting cancer care national systems:

- **Alignment of national standards** with EU-level expectations
- **Support difficult healthcare reforms** by providing a structured framework
- **Promotion of better organization** and deployment of resources

CAPACITY BUILDING

Capacity building activities

A key objective of EUnetCCC's Joint Action, is to **ensure the certification remains dynamic and future-oriented**. To achieve this, we are developing a capacity building framework designed to support institutions and centres applying for EUCCC Certification, **helping them gain lasting value from the capacity-building process.**

You can think of this **support as a structured, hands-on readiness and improvement programme** that accompanies - and continues beyond - your certification journey. It brings together :

1

A maturity-based pathway

Including a readiness checklist, gap analysis, and a maturity model spanning the 7 domains of the Standards. This pathway helps you clearly see where you are today and what matters most for the next steps in your journey.

2

A catalogue of activities

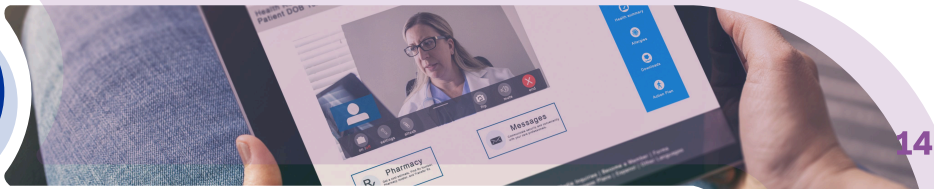
A rich set of resources you can draw on as you progress: preparatory and domain-specific guidelines, mutual learning opportunities such as pairing and mentoring, coaching, teaming, plus webinars on critical standards and short podcasts tackling adoption challenges—all designed to help you implement the Standards step by step.

3

A network layer

Aligned with the activities of the EU Network of CCCs, ensuring that peer learning and collaboration remain at the core—so that improvement never happens in isolation.

The program is not a one-off training. It is a continuous, needs-driven system that supports your centre from the very first contact, through certification, the 12-month progress check, annual reporting, and renewal.



ACTIVITIES

Overview of the proposed capacity-building activities

Below, for every step of the cerrtification pathway, you will find **a clear view of the capacity-building and support activities available to guide you along the way.**

1 → Allowance to apply

- **Orientation** to the preparatory process and the 7-domain model
- **Readiness/maturity check** to understand your baseline and plan your next steps.
- **Preparatory Guideline** to help you consider the overall challenge and make initial arrangement.

2 → Certification application

- **Diagnostic gap analysis** mapped to the 4-level maturity model, highlighting where to focus first.
- **Domain-specific guidelines & webinars** on critical standards to help you address high-impact gaps quickly.
- **Pairing, mentoring, coaching, and teaming opportunities** to de-risk implementation (e.g., consortia governance or tracer methods).

3 → On-site audit

- **Targeted "how-to" sessions** (e.g., turning self-assessment notes into auditable practice)
- **Peer tips** from centres that have tested similar audit sequences in pilots and field-tests.

4 → Reporting and improvement plan

- **Capacity-building tracks** tailored to your plan (e.g., guideline packs, mentoring cycles, coaching on quality-system fixes).
- **Quality-improvement indicators** to monitor progress—aligned to the Joint Action's evaluation framework and, from 2026, a continuous monitoring system.

5 → Certification attribution

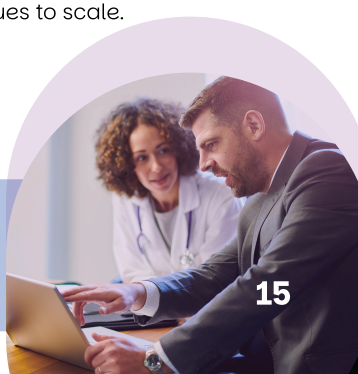
- **If certification is not achieved, you remain in the improvement stream,** with access to the same capacity-building resources to prepare for re-application.

6 → Follow-up and improvement plan implementation

- **Activities within the EU Network of CCCs** to share and adopt what works in practice.
- **ongoing learning opportunities,** including new webinars and guides as the programme continues to scale.

Priorization & inclusion

To keep capacity building focused and fair, the Joint Action uses capacity-building levels and selection criteria (e.g., whether the country has CCCs/CCs, your maturity level, and readiness). This defines priority access to high-touch items (pairing, coaching), while open resources (guidelines, webinars) remain broadly accessible.



EUCCC CERTIFICATION · FAQ

How is the Certification created, tested and improved?

The EUCCC certification process takes into consideration the previous Joint Action CraNE's outcomes. The ongoing completion of the scheme has involved a collaboration of more than 40 stakeholders across Europe and is the result of a thorough consultation and collaboration process. The initial version of the certification framework is currently tested with nine hospitals across Europe, relying on the commitment of 45 experts per domain, all of them committed to improve the scheme thanks to their expertise and feedback from the ground.

What evaluation criteria and thresholds apply?

Evaluation criteria:

- Based on 7 domains (Care, Prevention, Governance, Education & Training, Research, Innovation, Integration of Research and Care).

Certification requires:

- ≥70% average across all standards in each domain, and
- ≥80% average across core standards per domain.

Is the field test a real certification?

No. The field test is a rehearsal to validate and improve the framework, tools, and processes before the official roll-out. It does not result in certification.

When does the official certification start?

- Framework revision: December 2025 (after in-house testing feedback and April 2026 after on-site testing feedback).
- Roll-out period: Early 2026 through October 2028.
- Certificate validity: 5 years, with renewal starting within 18 months before expiry.

How long does the process take from application to decision?

The full certification pathway can take 18 to 24 months to complete.
Other specific pathways are being developed, such as the fast-track pathway for European CCCs already certified by existing certification schemes like the DKH or OECI ones.

EUCCC CERTIFICATION · FAQ

What documents or evidence do we need to prepare?

- Complete all e-tool forms with justifications.
- Attach required documents (policies, KPIs, governance charts, quality indicators).
- Describe non-compliances and improvement actions—these feed your improvement plan.

Will we receive feedback if we don't meet requirements?

Yes—at every validation gate:

1. After the application examination.
2. After the quality Assurance Review.
3. After the Final Go/No-Go for on-site audit.
4. After the certification attribution decision. If you're not ready to be certified, you'll be oriented to capacity-building before re-applying.

What happens if we are not certified?

You remain engaged thanks to:

- Access to capacity building activities (gap analysis, mentoring, webinars,...).
- Participation in network events (through the EU Network of CCCs).
- A clear re-application path after readiness is demonstrated.

Can we reapply if unsuccessful?

- Yes. After completing capacity-building and showing readiness. The minimum interval is yet to be determined, but your capacity building advisor will guide you.

What support is available during the process?

Four pillars:

1. Diagnostic gap analysis and priority plan.
2. Guidelines per domain and webinars on critical standards.
3. Mentoring, pairing, coaching, and teaming for high-impact gaps.
4. Continuous quality improvement monitoring with indicators.

Completed by:

- Templates & tools in the e-tool.
- Weekly open Q&A sessions and bilateral meetings during field test.
- Peer learning via WP8 network activities.

EUCCC CERTIFICATION · FAQ

Is there a cost?

There will be a cost to the certification. As determined by European rules and the regulation of the EUnetCCC Joint Action, 80% of the cost will be covered by the Joint Action. The remaining 20% will have to be covered by the centres.

What support is available after certification?

- 12-month progress review and feedback.
- Annual reporting.
- Access to webinars, guidelines, and network events for continuous improvement.
- Optional intermediate self-assessments.
- Renewal support before the 5-year validity ends.

How does this align with OECI/DKH or national schemes?

This certification will take into consideration existing certifications (e.g., national systems such as in Germany or OECI Accreditation & Designation) offering an accelerated certification pathway for DKH and OECI certified CCCs.

EUCC certification, while offering a new public scheme recognized at the EU and Member States level, will deliver tangible benefits providing: a transparent benchmark; a consistent quality in care, education and research through high standards and harmonized processes; clear targets with practical guidance for centres to reach excellence and detailed plans for continuous improvement.

Where do we access resources and tools?

The following resources will be accessible on the website eunetccc.eu in the first or second quarter of 2026. Members of the Joint Action will be able to create an account to access :

- The self-assessment e-tool for forms, evidence, and improvement plans.
- The Resource Centre / Knowledge Map (portal) for guidelines, templates, and learning materials.
- The EU Network of CCCs space for peer exchange and mutual learning.

Guidelines for account creation will be communicated to Joint Action members when available.

What are the inclusion criteria for capacity-building?

Open resources (guidelines, webinars) are available to all.
High-touch support (mentoring, coaching) is prioritized for:

- Centres in the certification process.
- Countries without CCCs/CCs or with lower maturity levels.

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PATHWAY #2

Joining the EU Network of CCCs

THE EU NETWORK OF CCCs

The European Network of CCCs aims to **convene a community of institutions committed to excellence and continuous improvement in cancer care and research.**

Network governance

The governance model of the European Network of CCCs is designed to ensure inclusive and transparent participation, but also to evolve over time in response to experience, changing needs, and strategic direction. To this end, throughout the Joint Action (JA) and the Network, governance will be implemented in three different phases :

The step-wise approach is designed to facilitate the transition from Joint Action governance to Network governance by minimizing decision-making overlaps and conflicts. Moreover, it allows the Network to test, adapt, and refine its governance through real-world experience during the interim period.

This phased development enables member engagement and ensures that the governance model is both functional and sustainable. By the end of the fully-fledged phase, the complete Network structure is expected to be in place, laying the groundwork for long-term continuity beyond the Joint Action

During the Interim Governance phase (March 2026 to September 2027), the Network operates with 3 bodies:

1. The Interim Network Assembly (INA)
2. The Secretariat
3. The Interim Membership Committee (IMC)

A fully-fledged governance model is expected from October 2027 onward. Interim rules may continue or be revised at that point.

THE EU NETWORK OF CCCs

Vision and Structure of the EU Network of CCCs

The EU Network of CCCs aims to:

- Reduce inequalities in cancer care across Europe.
- Foster collaboration in research, care, and education.
- Support professional development through joint training and knowledge exchange.
- Provide added value for all members, whether established CCCs or aspiring centres

The network is built on three pillars:

1

Joint EU Force in Cancer Care and Research

Mutual learning, collaborative initiatives, and participation in EU-wide programs.

2

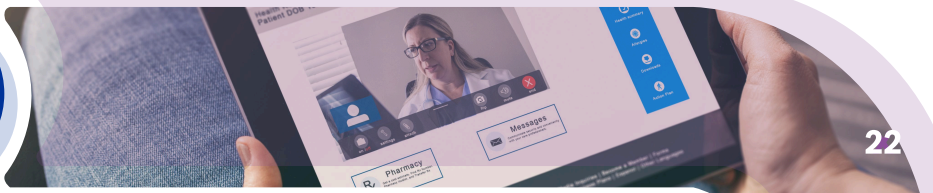
Spreading Prevalence of CCCs

Supporting centres to reach CCC standards, sharing improvement strategies, and facilitating certification.

3

Management and Governance

A dedicated structure to coordinate, support, and sustain network activities



MEMBERSHIP IN THE NETWORK

Eligibility (during the interim governance phase)

During the interim phase, three reference schemes co-exist: OECI, DKG/DKH, and EUCCC (once operational). To join the Network, your organisation must be part of the Joint Action (JA) and meet one of the following conditions:

- **Be a certified CCC holding a valid certification** from one of the 3 schemes (OECI, DKH and from EUCCC once operational) - in this case, you must keep a valid certification. If it expires during the interim phase, you must show you started re-certification within 12 months of the expiry date.
- **Be in a CCC certification process with EUCCC, OECI or DKH**
  - **For EUCCC:** designated as a candidate CCC by your national authority, accepted by the JA Designation and Admission Committee (DAC), and a Letter of Intent committing to begin the certification pathway by end-Q4 2027.
  - **For OECI and DKH:** accepted application to the respective scheme plus a Letter of Intent to start certification within 12 months.
- **Be a WP 4 pilot centre** (not certified and not yet in the certification) that is actively participating in the JA's WP 4 pilot activities. To stay in the Network, you should remain engaged in the pilot and apply for certification within 12 months after the pilot ends.
- **Be a Competent Authority (CA) from a participating country without an eligible centre.** You may remain in the Network until a national centre becomes eligible. The CA must notify the Secretariat within 2 months when that happens.

Membership vs. EUCCC Certification - What's the difference?

The Certification is a quality assurance mechanism. The Membership is about being part of the EUCCC Community to learn, share, and improve together. Certification is a criterion to access membership (or to qualify as in-process). Membership's goal is to foster continuous improvement across the community.

Eligible to full membership
(if part of the JA)

- Certified CCCs with a valid certification from EUCCC / OECI / DKH
- Centres currently in the certification process with EUCCC, OECI or DKH
- Competent Authorities from participating countries without an eligible centre
- WP 4 Pilot centres

There is **no automatic membership** for eligible centres.
Centres must apply and signal commitment to participate in the network (some centres may not be interested; we need explicit willingness to engage).

Involvement in the Network during Interim Governance

FULL-MEMBERS

Necessarily need to be part of the Joint Action

Who

- Certified CCCs with a valid certification from EUCCC / OECI / DKH
- Centres currently in the certification process with EUCCC, OECI or DKH
- Competent Authorities from participating countries without an eligible centre
- WP 4 Pilot centres

Rights

- **Join and vote in the INA:** nominate/elect the INA President.
- **Shape the Network's work:** define thematic groups and appoint chairs; set the meeting calendar; revise interim procedures; update the six-monthly activity plan; prepare the roadmap toward the Network Statute and draft the strategic agenda for the fully-fledged phase.
- **Help build the future model:** publish the second Call for Interest; refine the future governance model if needed; appoint the financial sustainability team together with the JA Coordination; draft a Code of Conduct for later approval.
- **Gain visibility and recognition:** formal acknowledgement of membership and inclusion in Network communications.

Obligations

- Active governance participation (e.g. Assembly attendance)
- Uphold agreed principles and contribute to peer support

Thematic groups

The Interim Network Assembly includes thematic groups and their sub-thematic groups, focusing on key areas such as Certification (WP5), Capacity Building (WP6), Cooperation (WP8), and CCCNs (WP9).

Additional themes may be suggested by the Interim Network Assembly in response to evolving needs and priorities.

These groups serve as consultation forums with centres and clinical professionals. Each thematic group is chaired by a representative from their respective WP leadership, and sub-thematic groups align with specific tasks or sub-tasks of the WPs.

A call for participation will be launched by the Secretariat during the initial months of the Network'sactivation, targeting INA's members. Participation is on a voluntary basis. Each thematic group will develop a work plan, which will be presented during the INA.

Fees and Financial Contributions

- **No fees during the first period** (and likely until the end of the Joint Action), as the network is not a legal entity and is publicly funded.
- **After the JA:** if EU funding is not available, fees may be introduced, with equity considerations reflecting national contexts.

Admission process

Call for Expression of Interest (EoI)

When : starting November 30th 2025

How : via the governance tool

Secretariat analysis

What : First screening by the Secretariat and account creation on Governance tool for centres declaring meeting eligibility criteria in the EoI form

IMC Review

What : IMC analyses and validates or rejects applications of candidates based on the rules established p. 24.

Formal validation

When: starting January 2026

What : the Interim Assembly reviews and formally validates admissions

Application package

Common to all:

- Application form
- Member profile (for network visibility)

Category-specific proofs :

- Specific documents to attest of their eligibility will be asked to centres, based on their profile. The details will be communicated later on.

Re-assessment and Revocation

Certification lapse: Members whose certification expires get a grace period to recertify and remain a member of the Network during this period.

If their recertification fails, the Secretariat alerts and ad-hoc committee to review and recommend action. The Assembly will decide on revocation.

Revocation: Inactivity (e.g. repeated missed Assemblies) or principle breaches may trigger exclusion and revocation of status in the Network.

NETWORK ACTIVITIES

Development and Implementation of Network Activities

Work Package 8 (WP8) of the Joint Action, aims to **release the potential of collaboration among the EU network of CCCs and strengthen their collective impact across Europe.** It will address the growing need for structured collaboration across institutions, driven by increasing specialization, limited expertise, and the shift toward precision medicine with smaller patient cohorts.

Key Activities

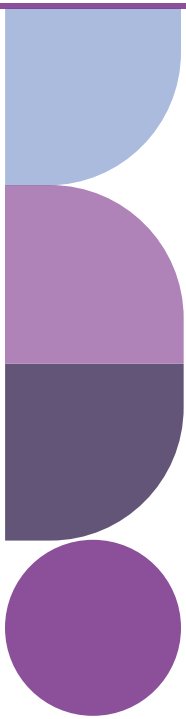
WP8 offers a broad range of activities designed to foster exchange, learning, and innovation. These include twinning and institutional exchanges, expert seminars and workshops, collegial interviews and peer dialogues, conferences, roundtable discussions, and collaborative teaming through expert groups. These efforts will promote active engagement across all eight thematic areas.

1/ Facilitating the implementation of guidelines: Strengthen the role of CCCs in implementing clinical guidelines, identifying gaps, and sharing experiences to support collaboration to adapt guidelines to different healthcare contexts and improve their relevance and uptake.

2/ Promoting personalised primary and secondary prevention: Enhance the role of CCCs in advancing personalized cancer prevention and screening through the development of Prevention Knowledge Hubs, a combination of digital platforms and local hubs within CCCs for sharing prevention research, tools, and innovations.

3/ Strengthening the cancer research ecosystem: Support CCC in expanding their research capabilities, enabling them to serve as key drivers in cancer research and innovation.

4/ Accelerating the adoption of precision diagnostics: Advance the fast-track implementation of precision diagnostics infrastructure by promoting standardisation and harmonisation, knowledge exchange, and the development of specialised expertise across centres.



5/ Enabling the secondary use of data in research and governance: Develop frameworks to support secondary use of data and promote standardised data practices to help CCCs create flexible, multipurpose clinical data warehouses to support both care and research.

6/ Advancing clinical trial capacity and collaboration: Reinforce the ability of CCCs to conduct high-quality, multi-centre clinical trials, enhancing their role in Europe's research landscape and improving access to innovative treatments.

7/ Supporting survivorship programmes in CCCs: Support the development and implementation of comprehensive survivorship programmes tailored to meet the diverse needs of cancer survivors across the EU.

8/ Enhancing governance and leadership in cancer centres: Support improved governance, leadership, and operational efficiency through peer learning and a dedicated leadership academy, helping CCCs grow as sustainable and well-managed institutions.

Shared benefits

EUnetCCC will provide meaningful opportunities for CCCs to engage in joint activities that enable professionals to grow their skills, share knowledge, and build lasting cross-border connections. **When one centre finds a solution, others can implement it within their own context,** benefitting from shared access to tools, good practices, and a supportive community that enhances their daily work and long-term impact. Collaboration models will be designed for scalability and adaptability, so successful approaches can be expanded to new thematic areas.

NETWORK · FAQ

Can non-certified centres or consortiums apply?

Yes, if they are pilots or have started the EUCCC Certification pathway and their application has been accepted.

Are there fees to join / participate in the Network?

No, during the first period (interim governance) and likely until the end of the Joint Action.

It is possible that fees may be demanded after the end of the Joint Action, depending on EU funding.

Is there a minimum "standard"?

We refer to **eligibility criteria** (e.g. certification status), but not a separate list of standards.

Can a member of the Network be revoked?

Yes, if they do not comply with the Network's values and mission, if certification lapses and recertification fails, or due to inactivity or breaches of their obligations. Revocation will be managed by the Secretariat and an Assembly decision.

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PATHWAY #3

Becoming a Comprehensive Cancer Care Network

IMPLEMENTING CCCNs

90%

of patients to have access to high quality oncology care by 2030

Europe's Beating Cancer Plan aims to ensure that **90% of eligible patients have access to quality-assured oncology care by 2030.** CCCNs, along with CCCs, will form the foundation to achieve this goal, working towards reducing inequality in access to high quality care across the EU, while enabling patients to benefit from diagnosis and treatment close to home. High-quality care standards will be aligned across CCCNs CCCs and jointly defined interfaces will ensure that all eligible patients have access to the highly specialized diagnostics and treatments of a CCC.

Why implement Comprehensive Cancer Care Networks in Europe?

> **The care of cancer patients is complex and requires an interdisciplinary and interprofessionnal team.**

The care of cancer patients poses major challenges for all European healthcare system. Due to demographic changes and the development of medical innovations, further cost increases are to be expected in the coming years, which will further intensify the discussion about appropriate and at the same time economical oncological care that can be made available to all cancer patients in Europe.

In addition, the care of cancer patients is complex. This is because cancer has a long course, can affect different organ systems, can be treated with a wide variety of therapeutic approaches, and impacts the lives of those affected both physically and psychologically.

> **CCCNs cover all components of the cancer continuum putting the patients with their specific disease in the centre.**

In order to **achieve quality-assured and evidence-based cancer care in the long term,** taking into account the complex care situation of cancer patients and against the backdrop of limited health resources **the CCCN concept was developed to support the setting up of interdisciplinary and interprofessional care networks that cover the entire cancer continuum** from early detection, diagnosis, treatment to follow-up and if necessary palliative care putting the patients and their specific disease at the centre.

IMPLEMENTING CCCNs

> **Currently cancer care is organized in different ways in different countries and even differently within different regions in the same country**

Care of oncological patients always needs cooperation of many disciplines and professional groups. These must have sufficient experience for the treatment of the corresponding tumour entity. The Set of Standards (SoS) for the establishment of CCCN summarizes the requirements for all experts involved so that the above-mentioned prerequisites can be met.

The CCCN concept and the SoS can support policy makers in establishing national quality-assured CCCNs that combine care close to home, if possible, with centralized treatment, if necessary.

For clinicians and health care professionals the CCCN concept and the SoS are helpful in order to implement reliable networks, on which experts work together in a structured way and with which unnecessary diagnostic, time delays and wrong therapy decisions are avoided.

Certified CCCN give patients the assurance that they will be treated by experts for their specific disease, who will develop and implement the best possible treatment plan for them.

> **The aim of CCCNs is...**

...to give all patients at all stages of the disease access to a high-quality care that covers all components of the cancer continuum from early detection and diagnosis to treatment and care, follow-up and if necessary, palliative care.

To further develop access to comprehensive high quality of tumour-specific care in CCCNs in all European Member States (MS), treating patients close to home and reducing inequalities across the European Union.

To ensure and align high standards in cancer care and to build sustainable interfaces with CCCs and other stakeholders in the cancer eco-system.

UNDERSTANDING CCCNs

1. **A CCCN consists of multiple units** belonging to different institutions dedicated to early detection, diagnosis, treatment, follow-up, supportive and palliative care and rehabilitation for the benefit of cancer patients and cancer survivors.

2. **In a CCCN an inter-professional and multidisciplinary team** work together along a tumour-specific, guideline-based patient pathway or along several pathways for the benefit of patients with each particular type of tumour.

3. **A CCCN collaborates with a Comprehensive Cancer Centre (CCC)**, e.g. for complex disease situations, diagnostics and/or research activities. The CCCN can be part of a CCC, can be the extension of a CCC and/or standalone and cooperating with a CCC. The focus is on function and not on structure.

4. **The CCCN partners interact** and have a formal agreement to work together in a programmatic and structured way with a common governance structure, in order to pursue their goals more effectively and efficiently through collective synergies.

5. **The CCCN promotes a uniform system of quality assurance and a unified informatics system** for optimal exchange of information. It provides both tumour-specific Quality Indicators as well as pan-cancer related indicators. The indicators are used by the governmental processes of the CCCN to make the quality of care in the CCCN transparent and to continuously improve it.

CCCNs · FAQ

Who can apply to become a certified CCCN?

Any cancer centre / cancer network / CCC meeting the CCCN Set of Standards, may apply and test their eligibility to become a certified CCCN.

What are the criteria to become a certified CCCN?

Tumour specific Standards include qualitative and quantitative requirements. This includes requirements on the structure of the interdisciplinary care network, personnel qualification, technical equipment, patient pathways as well as processes that need to be implemented. Moreover requirements for minimum case numbers and surgical volume per tumour entity are part of the Set of Standards.

What types of organisations should be part of a CCCN?

CCCNs can consist of different hospitals, units, departments; including a CCC; working together based on cooperation agreements and along patient pathways, using Quality Indicators for a continuous quality improvement process.

A CCCN is a network of qualified and jointly certified interdisciplinary institutions / departments / organisations that if possible represent the entire chain for health care for cancer patients from early detection and diagnosis to treatment and care, follow-up and if necessary palliative care. All partners of the CCCN must fulfill the applicable requirement in the Set of Standards.

Are CCCNs evaluated and certified the same way as CCCs?

Yes. The audit process is largely similar, but with different auditors (tumour-specific) and a smaller scope (care dimension / tumour specific part of the care dimension). Otherwise, CCCNs have to show, prepare and provide evidence, the same way CCCs do.

CCCNs • FAQ

How do CCCs and CCCNs complement each other and how can they cooperate with each other?

Jointly defined interfaces between CCCs and CCCNs ensure that all eligible patients have access to the highly specialized diagnostics and treatments of a CCC while patients benefit from high quality diagnosis and treatment close to home. Every CCCN should have a cooperation with a CCC to ensure seamless cooperation and interfaces to ensure access of their patients to highly specialized expertise of CCCs (i.e. access to clinical trials, treat specific / rare conditions of patients (genetic testing), access to genetic sequencing, molecular tumour boards, innovation and education / training). Having a certified tumour specific CCCN within a CCC could provide evidence for CCC Set of Standards on tumour-specific pathway implementation.

What is the benefit of becoming a CCCN?

The CCCN concept provides that all patients at all stages of their specific-disease access to a high-quality care that covers all components of the cancer continuum.
Interdisciplinary, multi-professional tumour-specific networks are set up and health care providers treat patients with verified high-quality medical expertise. Evidence-based medical guidelines are implemented and thus a broad application is ensured. Quality of care in the individual centre is recorded, analyzed, reflected and (if necessary) improved by applying suitable measures. A continuous quality improvement cycle (PDCA cycle) is successfully implemented.

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