



## Since we met last time...

### REVIEW OF PROGRESS, ACHIEVEMENTS AND CHALLENGES

**The ECCO 2018 European Cancer Summit Resolutions called for better measurement of quality cancer care, reduced financial discrimination for cancer survivors and improved roles for primary care in cancer care delivery. Kicking off Summit 2019, the opening panel reviewed progress against these targets.**

#### **Primary care to improve cancer patient outcomes**

Prof Mehmet Ungan said that the first steps toward the achievement of the 2018 Summit resolution on integrated cancer care has been taken with the publication of *ECCO Essential Requirements for Quality Cancer Care: Primary Care*, a peer-reviewed paper by 19 authors from a wide spectrum of countries and medical professions. He commented that this is probably the most important paper to date on the topic; and new evidence to inform health policy makers' thinking.

The paper is a consensus between 14 European professional societies and patient representatives, and presents a clear roadmap for improving primary care in cancer – with checklists and actions needed to bring patients high-quality cancer care. “Where others are talking about making this change, this group is doing it,” commented Prof Ungan.

*ECCO Essential Requirements for Quality Cancer Care: Primary Care* has been published in *Critical Reviews in Oncology/Hematology*. <http://bit.ly/30ToFtB>

#### **Progressing cancer quality standards across Europe**

Simon Oberst briefed the Summit on progress toward the realisation of the 2018 Summit resolution for achieving greater commonality in approach across Europe in respect to measurement and evaluation of quality cancer care. He explained that standards are critical to delivering high-quality cancer care and that oncology teams benefit greatly from the guidance and structure in approach that clear standards provide.

He outlined a series of relevant and interesting quality cancer care focused activities and initiatives underway at the European level designed to raise standards. These include: the ECCO Essential Requirements for Quality Cancer Care series, the OECI Accreditation and Designation Programme for cancer centres, activities by the German Cancer Society and partners within the EU Joint Action IPAAC (The Innovative Partnership for Action Against Cancer), and ongoing work by the European Commission's Joint Research Centre, including the European Commission Initiative on Breast Cancer.

A series of case studies demonstrated how standards support a multi-disciplinary approach to the quality of cancer treatment. Standards and accreditation are not a rubber stamp or certificate, Mr Oberst explained, but a process of learning and improvement across medical teams, based on demonstrated practices. “Who can improve? Clinicians, researchers, managers, and medical teams.” Mr Oberst said that a realistic target is to focus on 60-80 core standards that can be cascaded to non-specialist medical teams across the EU.

#### **The right to be forgotten – each survivor's right**

With increasing numbers of cancer survivors across Europe, too many are now sadly stigmatised and negatively impacted after completion of treatment by discrimination in respect to accessing certain financial services. The 2018 European Cancer Summit passed a Resolution aiming to improve this situation by pushing for national laws for ‘the right to be forgotten’.

Such legislation, as first introduced in France, enables citizens who have lived cancer free for a number of years, to not declare their past cancer diagnosis and treatment when making applications for such services as bank loans, mortgages and travel insurance. Without this legislation, in too many countries, former cancer patients find themselves discriminated against unfairly with serious negative impacts in respect to the conduct of their daily lives and attempts to secure a return to normality after cancer.

Reporting on the progress of her campaigning activity since the 2018 Summit, Prof Françoise Meunier said that France's landmark 2015 legislation is a model for countries to follow. It inspired Belgian lawmakers, who

passed their 'right to be forgotten' legislation earlier this year. "Working with ECCO, our members and partners, we won't rest until we achieve our ambition for a universal right to be forgotten across Europe," she said.

### **Patients voice their views and needs**

Discussing personal experiences with cancer care, Kathy Oliver summarised the findings of the 2019 All.Can pan-European survey – *Patient insights on cancer care: opportunities for improving efficiency*, which polled people affected by different cancers across ten countries. <http://bit.ly/2MWiRut>

Four action areas are summarised from the survey data:

#### » **Ensure swift, accurate and appropriately delivered diagnosis**

When asked to select one area of cancer care where they experienced the most inefficiency, 26% of respondents chose diagnosis – more than any other area of cancer care. 32% said their cancer was diagnosed as something different, once or multiple times.

#### » **Improve information sharing, support and shared decision making**

Respondents said they received too much information at once. They would prefer to see relevant details at appropriate points in their journey. 41% said they received no details at the hospital on peer support groups.

#### » **Make integrated multidisciplinary care a reality for all patients**

Specialised cancer nurses play a critical role as 'navigators,' helping patients adapt to their situations. 69% voiced a need for psychological support; 34% said none was available.

#### » **Address the financial implications of cancer**

Some 51% of respondents paid part of their care personally or through private insurance. Some said that diagnosis created life-long financial insecurity.

### **Understanding and assessing value in healthcare and oncology**

Reporting on the results of an ECCO project completed in February 2019, Prof Yolande Lievens addressed approaches to increase understanding of 'value in oncology treatment'. She led this process with international experts in patient advocacy, oncology research and treatment and statistical analysis. This led to an ECCO-led project investigating the application of value assessment methods in non-systemic oncology treatment. She stressed that patients' ability to benefit must be the starting point for measuring the value of any innovation.

There are various approaches to understand value in healthcare. But what are the optimal pathways; and is a common approach across different domains possible – for example pharmaceutical and non-systemic treatments? This project clarifies potential answers to some of these questions by reporting on the application of value-based healthcare across the cancer care spectrum. <http://bit.ly/2J7WGjM>

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**Prof Mehmet Ungan**, President, WONCA Europe: Greater integration of primary care to improve cancer patient outcomes

**Simon Oberst**, Chair, Organisation of European Cancer Institutes (OECI) Accreditation & Designation Programme: Reviewing OECI and ECCO activities to progress quality of cancer care across Europe

**Prof Françoise Meunier**, Vice President, Federation of European Academies of Medicine (FEAM): Legislative achievements in 2019 on protecting cancer survivors from financial discrimination

**Kathy Oliver**, Co-Director, International Brain Tumour Alliance (IBTA), Vice-Chair ECCO Patient Advisory Committee: All.Can initiative's survey of 4,000 people affected by different cancers across 10 countries

**Prof Yolande Lievens**, Past President, European Society for Radiotherapy and Oncology (ESTRO): Update – Value-based healthcare to achieve greater application to non-systemic treatment areas

#### **Moderators:**

**Prof Philip Poortmans**, President of the European CanCer Organisation (ECCO)

**Dr Ian Banks**, ECCO Board Member, Chair of the ECCO Patient Advisory Committee



*Prof Françoise Meunier,  
Vice President, Federation  
of European Academies of  
Medicine (FEAM)*

**ECCO 2019**  
EUROPEAN CANCER SUMMIT

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